FORM MO. 721 - QUITCLAIM GRED (Includual or Corporate) COPYNERIT THE STAVENDARED LAW PLET RARIO CO., PORTLORD, DR 90 70776 Vol. M98 Page '98 1 DEC -2 P3:30 STATE OF OREGON, County of ____ I certify that the within instrument Grantov's Home and Address was received for record on the ____ day, 19____, at of ____ Grantes's Name and Address book/reel/volume No. _____ on page After recording, return to (Homo, Address, Zip): SPACE RESERVED MILVAEL S. JAGER and/or as fce/file/instru-FOR ment/microfilm/redeption No. P. F. Box 597 RECORDER'S USE Gleverock, NV 89413 Records of said County, Until requested otherwise, send all tax statements to (Name, Address, Zip): Witness my hand and seal of County affixed. NALSE me By ___ , Deputy. KNOW ALL BY THESE PRESENTS that Thomas James Lee, a single man, and Michael Thomas Lee, <u>a single man</u> hereinafter called grantor, for the consideration hereinafter stated, does hereby remise, release and forever quitclaim unto Michael B. Jager & Margaret H. Jager, as trustees of the Jager family trust agreement dated 10-15-91 hereinafter called grantee, and unto grantee's heirs, successors and assigns, all of the grantor's right, title and interest in that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in Klamath County, State of Oregon, described as follows, to-wit: Lot 22 in Block 8 and an undivided 1/49th of Lot a in Block 11, Tract 1161, High Country Ranch, according to the plat thereof on file in the office of the County Clerk, Klamath County, Oregon. (IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE) To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever. The true and actual consideration paid for this transfer, stated in terms of dollars, is \$_1.00_ actual consideration consists of or includes other property or value given or promised which is part of the D the whole (indicate which) consideration. (The sentence between the symbols O, if not applicable, should be deleted. See ORS 93.030.) In construing this deed, where the context so requires, the singular includes the plural, and all grammatical changes shall be made so that this deed shall apply equally to corporations and to individuals. IN WITNESS WHEREOF, the grantor has executed this instrument this _____ day of ______ September, 1928; if grantor is a corporation, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGU-LATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPRO-PRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930. STATE OF OREGON, County of _____ This instrument was acknowledged before me on _ This instrument was acknowledged before me on _____ by as . of Notary Public for Qregon My commission expires HV

ALL-PURPOSE ACKNOWLEDGMENT 44136 State of California County of SAN Luis Obispo SS. On before me, personally appeared personally known to me SIGNERIS ORproved to me on the basis of satisfactory \Box evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their SHELLEY WINTER COMM. #1092433 signature(s) on the instrument the person(s), NOTARY PUBLIC CALIFORNIA or the entity upon behalf of which the SAM LUIS OBISPO, COUNTY by Comm. Expires March 31, 2000 () person(s) acted, executed the instrument. WITNESS my hand and official seal. The information below is not required by law. However, it could prevent fraudulent attachment of this acknowl-OPTIONAL INFORMATION . CAPACITY CLAIMED BY SIGNER (PRINCIPAL) DESCRIPTION OF ATTACHED DOCUMENT ENDIVIDUAL CORPORATE OFFICER Querc TITLE OR TYPE OF DOCUMENT TITLE(S) PARTNER(S) ATTORNEY-IN-FACT TRUSTEE(S) NUMBER OF PAGES [] GUARDIAN/CONSERVATOR DATE OF DOCUMENT OTHER: OTHER SIGNER IS REPRESENTING: NAME OF PERSON(S) OR ENTITY(IES) RIGHT THUMBPRINT OF SIGNER APA 5/97 VALLEY-SIERRA, 800-362-3369

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County of Carlin .	
County of San Luis Obispo	SS.
On OCT. 26 1998 before p	$\mathbf{T}_{\mathbf{n}}$
personally appeared <u>MicHael</u>	me, SHELLEY WINTER
	SIGNER(S)
personally known to me - OR-	
	proved to me on the basis of satisfacto evidence to be the person(s) whose name is/are subscribed to the will
	a source and the that have all
SHELLEY WINTER	
SAN LUIS OBISPO, COUNTY	
My Comm. Expires Murch 31, 2000	
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