

1999 NOV -5 PM 12: 59

RECORDING REQUESTED BY:
Same as below

WHEN RECORDED MAIL TO:
EDWARD D. LaPLOUNT
DIANNE TUCKER-LaPLOUNT

Vol M99 Page 44324

Ret:
~~7434 HERSCHEL AVE #7~~
~~LA JOLLA CA 92037~~

P.O. Box 1779
Bishop CA 93515

APN: R03610-014BA-03700-000 SPACE ABOVE THIS BAR FOR RECORDER'S USE

MAIL TAX STATEMENTS TO:

DOCUMENTARY TRANSFER TAX \$

Edward D. LaPlount
Dianne Tucker-LaPlount

~~7434 Herschel Ave #7~~ P.O. Box 1779
~~La Jolla CA 92037~~ Bishop CA 93515

Computed on the consideration or
value of property conveyed or

Computed on the consideration or
value less liens or encumbrances
remaining time of sale.

Signature of Declarant or Agent Determining Tax

QUITCLAIM DEED

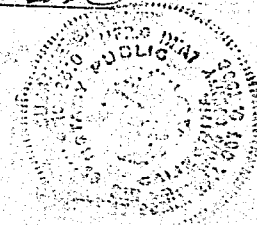
I, MARGARET MANSON, hereby quitclaim to EDWARD D. LaPLOUNT and DIANNE TUCKER-LaPLOUNT, husband and wife, as joint tenants, all right, title, and interest in the real property situated in the County of Klamath, State of Oregon, described as:

SPRAGUE RIVER 1ST ADDITION, BLOCK 6, LOT 11 & 12

Executed at San Bernardino, California.

DATED: April 8, 1996

Margaret J Manson
MARGARET MANSON



CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of CaliforniaCounty of San BernardinoOn April 08, 1996 before me, Suzanne Ghaly, Notary Public

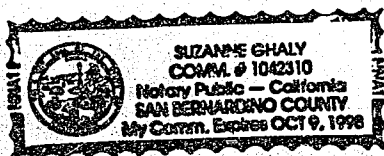
Date

Name and Title of Officer (e.g., Jane Doe, Notary Public)

personally appeared Margaret Manson

Name(s) of Signer(s)

- ☐ personally known to me – OR ☒ proved to me on the basis of satisfactory 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 signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Suzanne Ghaly
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Suit claim needDocument Date: April 08, 1996 Number of Pages: (1)Signer(s) Other Than Named Above: None

Capacity(ies) Claimed by Signer(s)

Signer's Name: Margaret Manson

- ☒ Individual
☐ Corporate Officer
 Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing:

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here



Signer's Name: _____

- ☐ Individual
☐ Corporate Officer
 Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing:

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here

State of Oregon, County of Klamath
 Recorded 11/05/99, at 12:57 p.m.
 In Vol. M99 Page 44324

Linda Smith,
County Clerk

Fee \$ 35.00