

NS

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Alfonso L. Benton

P.O. Box 1571

Ridgecrest, CA 93556

Grantor's Name and Address

Cale AB Pelton and Cara BP Judd

3035 SW Homesteader Rd.

West Linn OR 97068

Grantee's Name and Address

After recording, return to (Name, Address, Zip):

Cale AB Pelton

3035 SW Homesteader Rd.

West Linn OR 97068

Until requested otherwise, send all tax statements to (Name, Address, Zip):

Cale AB Pelton

3035 SW Homesteader Rd.

West Linn OR 97068

SPACE RESERVED
FOR
RECORDER'S USE

State of Oregon, County of Klamath

Recorded 2/08/00, at 8:12 a.m.

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Linda Smith,

County Clerk

Fee \$ 26.⁰⁰
4⁰⁰ OP Act.

QUITCLAIM DEED

KNOW ALL BY THESE PRESENTS that Alfonso L. Benton, Trustee of the Alfonso L. Benton Revocable Trust - Dated September 29, 1989

hereinafter called grantor, for the consideration hereinafter stated, does hereby remise, release and forever quitclaim unto Cale AB Pelton and Cara BP Judd

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 13 Block 1, Track 1110, County of Klamath.

(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 \$.00. However, the actual consideration consists of or includes other property or value given or promised which is ☐ part of the ☒ the whole (indicate which) consideration. (The sentence between the symbols ®, 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 _____, 19____; 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 to do so by order of its board of directors.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE 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.

Alfonso L. Benton
Alfonso L. Benton

STATE OF OREGON, County of _____) ss.

This instrument was acknowledged before me on _____, 19____,
by _____

This instrument was acknowledged before me on _____, 19____,
by _____

as _____
of _____

See
attached CA
Notarial Acknowl.

Notary Public for Oregon

My commission expires _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of

Kern

} ss.

On January 28, 2000, before me,Gale Marie Vanderpool

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

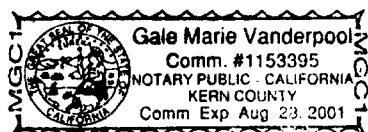
personally appeared

Alfonso L. Benton

Name(s) of Signer(s)

☐ personally known to me☒ 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~~s~~~~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.



Place Notary Seal Above

WITNESS my hand and official seal.

Gale Marie Vanderpool
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 DocumentTitle or Type of Document: Quit Claim DeedDocument Date: Sept 29, 1989Number of Pages: 1Signer(s) Other Than Named Above: none**Capacity(ies) Claimed by Signer**

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