

RECORDING REQUESTED BY

200 MAY -4 PM 12: 23

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AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:

State of Oregon, County of Klamath
Recorded 05/04/00, at 12:23 p.m.
In Vol. M00 Page 16125
Linda Smith,
County Clerk Fee \$ 21⁰⁰

NAME Paula J. Negley
STREET ADDRESS P.O. Box 43 10600 Trademark Parkway N. STE 405 Rancho Cucamonga CA
CITY, STATE & ZIP CODE Riverside, CA 92502
TITLE ORDER NO. _____ ESCROW NO. _____

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$

- ☐ computed on full value of property conveyed, or
☐ computed on full value less liens and encumbrances remaining at time of sale.

Signature of Declarant or Agent Determining Tax Firm Name

STEVE SCHWARTZ

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise, release and forever quitclaim to PAULA J. NEGLEY

the following described real property in the XXXX County of Klamath, State of Oregon
Lot #1-B E1/2 W1/2 N1/2 N1/2 SE1/4 NE1/4 Section 8, TWP 25 S, R&E, W.M.
2 1/2 acres m or l. Subject to a thirty foot (30) wide easement along West and South border for mutual and all roadway purposes. Subject to twenty (20) ft. wide easement for power utility use. Subject to reservations and restrictions of record. 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.

Assessor's parcel No. _____

Executed on April 28, 2000, at Bellingham, Wa.

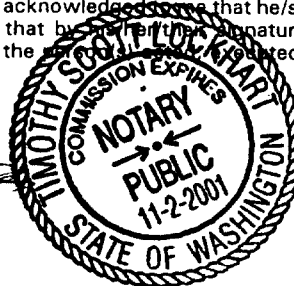
STATE OF Washington
COUNTY OF Whatcom

Steve Schwartz

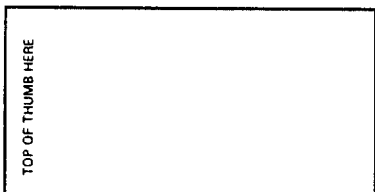
On 4-28-00 before me, Timothy S. Lockhart, Commercial Loans
personally appeared Steve Schwartz personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same in his/her/their authorized capacity(ies), and that he/she/they executed the instrument as the person(s), or the entity upon behalf of which the instrument was executed.

WITNESS my hand and official seal.

(SIGNATURE OF NOTARY) (SEAL)



RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)

- ☐ INDIVIDUAL(S)
☐ CORPORATE OFFICER(S) (TITLE)
☐ PARTNER(S) ☐ LIMITED ☐ GENERAL
☐ ATTORNEY IN FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER:

SIGNER IS REPRESENTING:

(Name of Person(s) or Entity(ies))



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