

A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 19th day of June, 2000 (year),by first party, Grantor, *Dennis R. Erb*whose post office address is *2631 F Street, Springfield, OR 97477*to second party, Grantee, *Margaret E. Erb*whose post office address is *525 Pioneer Parkway W. Apt 1, Springfield, OR 97477*

WITNESSETH, That the said first party, for good consideration and for the sum of No Dollars (\$ 0.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances there- to in the County of *Klamath*, State of *Oregon* to wit:

*The N 1/2 S 1/2 W 1/2 NW 1/4 SW 1/4 Section 10,
Township 25 South, Range 8 East of the
Willamette Meridian, in the County of
Klamath, State of Oregon.*

CODE 51 MAP 2508-1000 TL 3700

ZZHH (1)

Rev. 4/99

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.



0 53926 20040 5

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Hettie A. Woodruff
Signature of Witness

Hettie A. Woodruff
Print name of Witness

Wendy Henkaline
Signature of Witness

Wendy Henkaline
Print name of Witness

Dennis R Erb
Signature of First Party

DENNIS R ERB
Print name of First Party

Signature of First Party

Print name of First Party

State of Oregon)
County of Lane
On 6-8-2000 before me,
appeared

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.

Rose M. Keep
Signature of Notary



Type of ID _____
exp. 5-3-02 (Seal)

State of _____)
County of _____
On _____ before me,
appeared

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.

Signature of Notary

Affiant _____ Known _____ Produced ID _____
Type of ID _____ (Seal)

Margaret E. Erb
Signature of Preparer

MARGARET E. ERB
Print Name of Preparer

525 Pioneer Parkway W. #1
Address of Preparer

(2) Springfield, OR 97477

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State of Oregon, County of Klamath
Recorded 06/22/00, at 1:52p m.
In Vol. M00 Page 22731
Linda Smith,
County Clerk Fee \$ 26.00