

RECORDING REQUESTED BY

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

NAME JOHN J. HARRIS
STREET ADDRESS 14420 Civic Dr., #4
Victorville, CA 92392

CITY, STATE &

ZIP CODE

TITLE ORDER NO. _____ ESCROW NO. _____

State of Oregon, County of Klamath
Recorded 12/27/00, at 2:00 P m.
In Vol. M00 Page 46491
Linda Smith,
County Clerk Fee \$ 21.00

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ 0.00 (Sift)

☐ 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 John J. Harris Firm Name LAW OFFICE OF JOHN J. HARRIS

JOHN J. HARRIS (D.O.B. 10/1/29; SS #559-32-7715)

(NAME OF GRANTOR(S))
the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise, release and
forever quitclaim to JOHN J. HARRIS (D.O.B. 6/23/54; SS #267-02-9874)

(NAME OF GRANTEE(S))
the following described real property in the City of Klamath Falls, County of Klamath, State of OR:

Lot 1 Block 5 Klamath River Acres, according to the official plat
thereof on file in the office of the County Clerk of Klamath County,
Oregon.

Assessor's parcel No. R 3907-36 A-3300

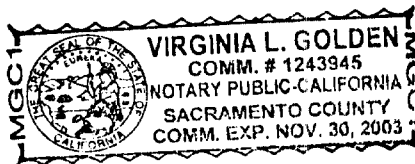
Executed on 11-13-00, at SACRAMENTO, CA.
(CITY AND STATE)

STATE OF CaliforniaCOUNTY OF SacramentoOn 11/13/00 before me, Virginia L. Golden

(NAME/TITLE, i.e., "JANE DOE, NOTARY PUBLIC")
personally appeared JOHN J. HARRIS 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.

Virginia L. Golden
(SIGNATURE OF NOTARY) (SEAL)



MAIL TAX

STATEMENTS TO: _____

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular
transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcotts makes no
representation or warranty, express or implied, with respect to the merchantability or fitness of this form for an
intended use or purpose.

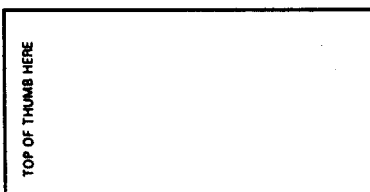
WOLCOTTS FORM 790
QUITCLAIM DEED

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Rev. 3-94b (price class 3A)



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RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)

☒ INDIVIDUAL(S)
☐ CORPORATE
OFFICER(S) _____ (TITLES)

☐ PARTNER(S) ☐ LIMITED
☐ GENERAL

☐ ATTORNEY IN FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____

SIGNER IS REPRESENTING:

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