

Return to:

Phillip E. + Joyce L. Sandoval
24979 Lucien Way
Hayward, Ca. 94544

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A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this _____ day of _____, (year),

by first party, Grantor, SANDOVAL, DWAYNE E.

whose post office address is 11958 SUN FORREST DR.
LAPINE, CA 97739

to second party, Grantee, SANDOVAL, PHILLIP E. + JOYCE L.

whose post office address is 24979 LUCIEN WAY
HAYWARD, CA 94544

WITNESSETH, That the said first party, for good consideration and for the sum of
ONE Dollars (\$1.00) 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:

PROPERTY DESCRIPTION: BLOCK 5, LOT 2,
SUN FOREST ESTATES, STATE OF OREGON, KLAMATH
COUNTY,

SUBJECT TO THE FOLLOWING RESTRICTIONS,
RESERVATIONS, EASEMENTS AND RIGHTS OF WAY
OF RECORD.

(1)

AHAA

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Rev. 6/00

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

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:

Signature of Witness

Rayne E. Sanford
Signature of First Party

Print name of Witness

Print name of First Party

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

State of Oregon }

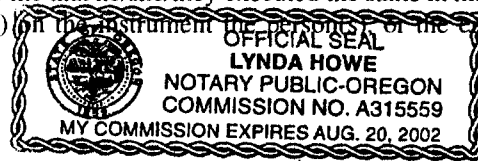
County of Deschutes

On July 16, 2001 before me, Lynda Howe

appeared Dwayne Sandova

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.



Lynda Howe
Signature of Notary

Affiant Known Produced ID
Type of ID DL

(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)

Signature of Preparer

Print Name of Preparer

Address of Preparer

(2)

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

State of Oregon, County of Klamath
Recorded 07/18/01 at 11:30a m.
In Vol. M01 Page 35098
Linda Smith,
County Clerk Fee \$ 26.00