LF298CA-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 47H day of SEPTEMBER, 2001 (year). by first party, Grantor, BURDINE, WILLIAM T. & HELGA E. whose post office address is 10249 COACHELLA CANALRI) 440, NILAND, CA. 92257 to second party, Grantee, BURDINE, MARK W. whose post office address is 10249 COACHELLA CANALRD \$401, NILAND, CA 92257

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 thereto in , State of OR KLAMTH the County of LOT# 60 LOCATED ON PACKSADOLE CIRCLE, TRACT 1010, FIRST ADDITION TO FERGURSON MOUNTAIN PINES.

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:

Marian Sectolar	William T. Burne Lelga & Burolin
Signature of Witness	Signature of First Party
Marian Seddon	WILLIAM T. BURDINE - HELGA E. BURDIN
Print name of Witness	Print name of First Party
Marian Soldon	
Signature of Witness	Signature of First Party
MARIAN SEDDON	
rint name of Witness	Print name of First Party
	Signature of Preparer
	William T. Burdine Print Name of Preparer
	10249 Coachella Canal RD 401 Address of Preparer
	NILAND, CA 9225/

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California)
County of Kwersede	ss.
County of	<u> </u>
On $\frac{9/19/01}{\text{Oyle}}$, before me, Λ	Moral Janobi (n. T.) Name and Title of Officer (e.g., "Jan) Doe, Notary Public")
personally appeared Vllga Ex	na Burdent
	Name(s) of Signer(s)
	□ personally known to me□ proved to me on the basis of satisfactory evidence
DEBORAH G. KANOSKI Commission # 1313877 Notary Public - California Riverside County My Comm. Expires Jul 19, 2008	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.
Place Notary Seal Above	WITNESS my hand and official seal. When the seal of Notal y Public of Notal y Publi
OF	PTIONAL -
Though the information below is not required by law and could prevent fraudulent removal ar	w, it may prove valuable to persons relying on the document and reattachment of this form to another document.
Description of Attached Document Title or Type of Document:	But Claim Red
Document Date: 9/4/0/	Number of Pages:
Signer(s) Other Than Named Above:	
Capacity(ies) Claimed by Signer	
Signer's Name:	RIGHT THUMBPRINT
☐ Individual	OF SIGNER Top of thumb here
☐ Corporate Officer — Title(s):	
☐ Partner — ☐ Limited ☐ General	
☐ Attorney in Fact	
Trustee	
Guardian or Conservator	
☐ Other:	

© 1999 National Notary Association • 9350 De Soto Ave., P.O. Box 2402 • Chatsworth, CA 91313-2402 • www.nationalnotary.o

State of Oregon, County of Klamath Recorded 09/25/01 at 8:29a m. In Vol. M01 Page 48573
Linda Smith,
County Clerk Fee\$ 3/2