'01 SEP 26 AM9:36

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

NAME REX M CCARthy d. STREET 145 OCEAN VIEW

CITY, STATE & DEPOR BAY, OR SIPCODE

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State of Oregon, County of Klamath Recorded 09/26/01 at 9:36 a.m. In Vol. M01 Page 48970 Linda Smith;

SPACE ABOVE THIS LINE FOR RECORDER'S USE

DOCUMENTARY TRANSFER TAX & ☐ computed on full value less liens and encumbrances remaining at time of sale. Signature of Declarant or Agent Determining Tax Firm Name William OHNA (NAME OF GRANTOR(SI) the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise, release and forever quitclaim to Klamat the following described real property in the City of State of RNGE 12, Block Soc, 4, Tract Lot 4, Acres 5.16 Assessor's parcel No. ,2001, at (in(0) N STATE OF UTEON COUNTY OF LINDIN before me. Kath land. McDona RIGHT THUMBANT (Optional) personally appeared William McCarring and personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subcribed 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), MANAGARA M OFFICIAL SEAL or the entity upon behalf of which the CAPACITY CLAIMED BY SIGNER(S) KATHLEEN L MC DONALD person(s) acted, executed the instrument. NOTARY PUBLIC - OREGON MINDIVIDUAL(S) COMMISSION NO. 319857
MY COMMISSION EXPIRES JAN. 20, 2003 CORPORATE OFFICER(S) ITITLES PARTNER(S) | LIMITED (SEAL) GENERAL ☐ ATTORNEY IN FACT MAIL TAX TRUSTEE(S) STATEMENTS TO: ☐ GUARDIAN/CONSERVATOR OTHER 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. SIGNER IS REPRESENTING: (NAME OF PERSON(S) OR ENTITY(IES):

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WOLCOTTS FORM 790 - Rev. 3-94 (price class 3A) QUITCLAIM DEED