

'01 OCT 22 AM 9:13

RECORDING REQUESTED BY

Vol. M01 Page 53488

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

NAME

STREET ADDRESS

CITY, STATE & ZIP CODE

TITLE ORDER NO. _____ ESCROW NO. _____

State of Oregon, County of Klamath
Recorded 10/22/01 at 9:13 a. m.
In Vol. M01 Page 53488
Linda Smith,
County Clerk Fee\$ 21.00

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$

- ☐ 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 _____ Firm Name _____

DARCIE MARIE SCYPHERS

(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 BRUCE RAYMOND SCYPHERS

(NAME OF GRANTEE(S))

the following described real property in the City of KIAMATH FALLS, County of KIAMATH, State of OREGON

LOT 2, Block 6, Nob Hill Subdivision, KIAMATH FALLS, OREGON

Assessor's parcel No. R-3809-020DD-10500-000

Executed on 10/15 at Vista, Ca.

(CITY AND STATE)

STATE OF CALIFORNIA

COUNTY OF SAN DIEGO

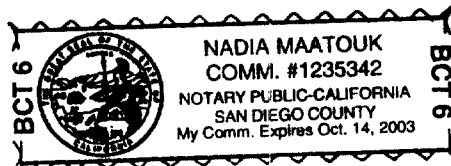
On 10/15/2001 before me, Nadia Maatouk, Notary Public

(NAME/TITLE, i.e., JANE DOE, NOTARY PUBLIC)

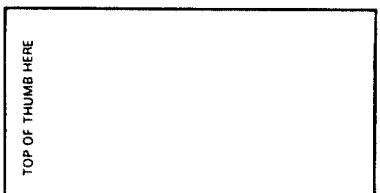
personally appeared Darcie Marie Scyphers personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Nadia Maatouk
(SIGNATURE OF NOTARY) (SEAL)



RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)

- ☐ INDIVIDUAL(S)
☐ CORPORATE OFFICER(S) _____ (TITLE)
☐ PARTNER(S) ☐ LIMITED ☐ GENERAL
☐ ATTORNEY IN FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____

SIGNER IS REPRESENTING:

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

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 ©1994 WOLCOTTS FORMS, INC.
QUITCLAIM DEED Rev. 3-94b (price class 3A)



21-
Re: Bruce Scyphers
832 Barsby St.
Vista, CA 92084