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LF298-04

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QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 4th day of October, 2001 (year),

by first party, Grantor, Nancy R. Yates

whose post office address is 93 Northridge Terr #43
Medford, Or 97501

to second party, Grantee, Norman E. Yates

whose post office address is 5535 A SE 115th
PORTLAND OR
97266

WITNESSETH, That the said first party, for good consideration and for the sum of

Dollars (\$ other) 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 the County of KLAMATH, State of OREGON

to wit: LOT 5 BLOCK 3
LITTLE RIVER RANCH
PLAT 1204

PHYSICAL ADDRESS (153030 COLLAR DR
LA PINE OR
97739)

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

Nancy R. Yates
Signature of First Party

Print name of Witness

Print name of First Party

Signature of Witness

Signature of First Party

Print name of Witness

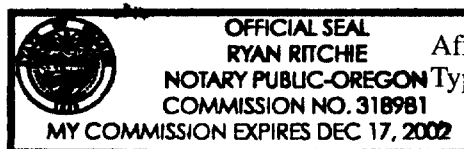
Print name of First Party

State of Oregon
County of Jackson
On 4 October
appeared Nancy R. Yates

before me, Ryan Ritchie

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.

Ryan Ritchie
Signature of Notary



Affiant _____ Known _____ Produced ID _____
Type of ID _____
(Seal)

State of _____
County of _____
On _____
appeared _____

before me,

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