

RECORDING REQUESTED BY

Vol M01 Page 55996

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

NAME LILLIAN E. MARKOVICH
 STREET ADDRESS 14555 MESA ST.
 CITY, STATE & ZIP CODE HESPERIA, CA. 92345
 TITLE ORDER NO. _____ ESCROW NO. _____

State of Oregon, County of Klamath
 Recorded 11/01/01 9:06a m.
 In Vol. M01 Page 55996
 Linda Smith,
 County Clerk Fee \$ 21.00

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ 0
☐ 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 _____

MARIA MASLOFF

(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 LILLIAN E. MARKOVICH
 (NAME OF GRANTEE(S))
 the following described real property in the City of KLAMATH, County of KLAMATH, State of OR:

PROPERTY DESCRIPTION:

TWP 31 RNGE 7, BLOCK SEC 16, TRACT S2SE4SE4NW4
 N 2NE 4 SE 4, ACRES 17.63

MAP NO. R-3107-01600-00800-000

Assessor's parcel No. _____

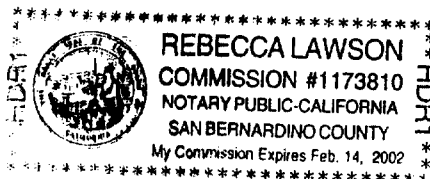
Executed on OCTOBER 28, 2001, at HESPERIA, CALIF.
 (CITY AND STATE)

STATE OF CALIFORNIACOUNTY OF SAN BERNARDINOOn 10-29-01 before me, REBECCA LAWSON, Notary Public

personally appeared MARIA MASLOFF (NAME/TITLE, i.e., "JANE DOE, NOTARY PUBLIC") 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.

Rebecca Lawson
 (SIGNATURE OF NOTARY) (SEAL)



RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)
☒ INDIVIDUAL(S)
☐ CORPORATE OFFICER(S) _____ (TITLES)

☐ PARTNER(S) ☐ LIMITED
☐ ATTORNEY IN FACT ☐ GENERAL
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____

MAIL TAX STATEMENTS TO:

LILLIAN MARKOVICH
14555 MESA ST, HESPERIA, CA 92345

WOLCOTTS FORM 790 ©1994 WOLCOTTS FORMS, INC.
 QUITCLAIM DEED Rev. 3-94b (price class 3A)



SIGNER IS REPRESENTING:
 (Name of Person(s) or Entity(ies))