

02 NOV 26 AM 8:09

Vol M02 Page 68585
STATE OF OREGON, _____Suzanne Harris26469 Fairway CircleSanta Clarita, 91321

Grantor's Name and Address

Suzanne M. Harris26469 Fairway CircleSanta Clarita, Calif 91321

Grantee's Name and Address

After recording, return to (Name, Address, Zip):

Suzanne M. Harris26469 Fairway CircleSanta Clarita, Calif. 91321

Until requested otherwise, send all tax statements to (Name, Address, Zip):

Suzanne M. Harris26469 Fairway CircleSanta Clarita, Calif. 91321SPACE RESERVED
FOR
RECORDER'S USE

State of Oregon, County of Klamath

Recorded 11/26/2002 8:09A m.Vol M02, Pg 68585-86

Linda Smith, County Clerk

Fee \$ 26.00 # of Pgs 2

puty.

QUITCLAIM DEED

KNOW ALL BY THESE PRESENTS that Suzanne Harrishereinafter called grantor, for the consideration hereinafter stated, does hereby remise, release and forever quitclaim unto Suzanne M. Harris, Trustee, or Successor Trustee, under the Suzanne M. Harris Family Trust dated Jan. 8, 1992hereinafter called grantee, and unto grantee's heirs, successors and assigns, all of the grantor's right, title and interest in that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in Klamath County, State of Oregon, described as follows, to-wit:

Prop: ID: R265126

Map Tax Lot: R-3510-023A0-06000-000

, Legal: Klamath Forest Estates Block 13, Lot 8.

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ None. [Ⓢ] However, the actual consideration consists of or includes other property or value given or promised which is ☐ part of the ☐ the whole (indicate which) consideration. [Ⓢ] (The sentence between the symbols [Ⓢ], if not applicable, should be deleted. See ORS 93.030.)

In construing this deed, where the context so requires, the singular includes the plural, and all grammatical changes shall be made so that this deed shall apply equally to corporations and to individuals.

IN WITNESS WHEREOF, the grantor has executed this instrument on November 19, 2002; if grantor is a corporation, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized to do so by order of its board of directors.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930.

Suzanne M. HarrisSee attached Notary Acknowledgment

STATE OF OREGON, County of _____) ss.

This instrument was acknowledged before me on _____,
by _____This instrument was acknowledged before me on _____,
by _____
as _____
of _____

Notary Public for Oregon

My commission expires _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of

Los Angeles

} ss.

On

November 19, 2002

Date

before me,

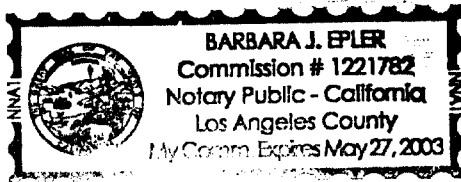
Barbara J. Epler

Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared

Suzanne M. Harris

Name(s) of Signer(s)

☒ personally known to me☐ 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.

Barbara J. Epler

Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document:

Quitclaim Deed

Document Date:

November 19, 2002

Number of Pages:

1

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: _____

☒ Individual☐ Corporate Officer — Title(s): _____☐ Partner — ☐ Limited ☐ General☐ Attorney in Fact☐ Trustee☐ Guardian or Conservator☐ Other: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here