

03 FEB 5 AM 8:52

Vol M03 Page 06982  
STATE OF OREGON, 1

Gary F. Henderson

5825 Hosac Way  
Citrus Heights, CA 95621

Mary Latricia Adams  
1505 Madison Street, #30  
Klamath Falls, OR 97603

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

Mary Latricia Adams  
1505 Madison Street, #30  
Klamath Falls, OR 97603

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

Mary Latricia Adams  
1505 Madison Street, #30  
Klamath Falls, OR 97603

SPACE RESERVED  
FOR  
RECORDER'S USE

State of Oregon, County of Klamath  
Recorded 02/05/2003 8:52 a.m.  
Vol M03 Pg 06982-83  
Linda Smith, County Clerk  
Fee \$ 26.00 # of Pgs 2

QUITCLAIM DEED

KNOW ALL BY THESE PRESENTS that Gary F. Henderson

hereinafter called grantor, for the consideration hereinafter stated, does hereby remise, release and forever quitclaim unto Mary Latricia Adams hereinafter 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:

Lot 4 in Block 16, BUENA VISTA ADDITION, to the City of Klamath Falls, according to the official plat thereof on file in the Office of the County Clerk of Klamath County, Oregon

3809-19DC-06100-000

438244

(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 \$ -0- . 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 January 30, 2003; 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.

GARY F. HENDERSON

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**

06983

No. 5907

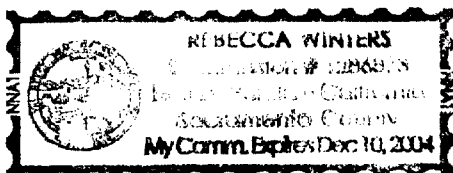
State of California

County of Sacramento

On 11/30/03 before me, Rebecca Winters Notary Public  
DATE NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"

personally appeared Gary F. Henderson  
NAME(S) OF SIGNER(S)

☐ 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 Winters  
SIGNATURE OF NOTARY

**OPTIONAL**

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

**CAPACITY CLAIMED BY SIGNER**

☐ INDIVIDUAL  
☒ CORPORATE OFFICER

TITLE(S)

☐ PARTNER(S) ☐ LIMITED  
☐ GENERAL

☐ ATTORNEY-IN-FACT  
☐ TRUSTEE(S)  
☐ GUARDIAN/CONSERVATOR  
☐ OTHER: NA

**SIGNER IS REPRESENTING:**  
NAME OF PERSON(S) OR ENTITY(IES)

**DESCRIPTION OF ATTACHED DOCUMENT**

Quitclaim Deed  
TITLE OR TYPE OF DOCUMENT

1pg + Notary pg attached  
NUMBER OF PAGES

11/30/03  
DATE OF DOCUMENT

NA  
SIGNER(S) OTHER THAN NAMED ABOVE