

'03 APR 30 AM 8:26

Vol M03 Page 28015AND WHEN RECORDED MAIL THIS DEED AND, UNLESS
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:NAME Judson and Donna PhippsSTREET 5930 Castle AvenueADDRESS Dunsmuir, CA 96025

CITY, STATE &

ZIP CODE

TITLE ORDER NO. _____ ESCROW NO. _____

State of Oregon, County of Klamath

Recorded 04/30/2003 8:26 a m.Vol M03 Pg 28015-17

Linda Smith, County Clerk

Fee \$ 31.00 # of Pgs 3

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

Charlene Jackson

(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 Judson P. Phipps and Donna L. Phipps, husband and wife as Joint Tenants
 the following described real property in the City of _____, County of Klamath, State of OR :

(NAME OF GRANTEE(S))

See Exhibit One Attached hereto and made a part hereof

Assessor's parcel No. R-4009-00600-00700 and R-4008-001A0-00400

Executed on _____, _____, at _____

(CITY AND STATE)

STATE OF _____

COUNTY OF _____

On _____ before me, the undersigned

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

personally appeared _____ 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)

(SEAL)

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

7 67775 39790 1

RIGHT THUMBPRINT (Optional)

TOP OF THUMB HERE

CAPACITY CLAIMED BY SIGNER(S)

☐ INDIVIDUAL(S)☐ CORPORATE

OFFICER(S)

(TITLES)

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

SIGNER IS REPRESENTING:

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

31

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Siskiyou

} ss.

On April 28, 2003, before me, Adrienne R Dorst, Notary Public

Date

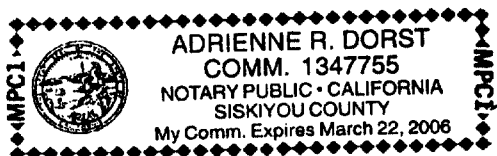
Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared Charlene Jackson

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.

Adrienne R Dorst
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 DocumentTitle or Type of Document: Quitclaim DeedDocument Date: _____ Number of Pages: two

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



EXHIBIT ONE

28017

Parcel No. 1:

The southwest quarter of the northwest quarter of Section 6, Township 40 S., Range 9 EWM, containing approximately 40 acres.

Klamath County Tax Lot No. R-4009-00600-00700

Parcel No. 24:

Beginning at the northeast corner of Section 1, Township 40 South, Range 8, EWM; thence south along the section line common to said Section 1 and Section 6, Township 40 S, Range 9 EWM 1320 feet to the true point of beginning of this description; thence west 710.53 feet; thence north 360 feet; thence west 610 feet; thence south 00°09' east 560 feet; thence north 89°56'19" east 50 feet; thence south 00°09' east 230 feet; thence north 89°56'19" west 50'; thence south 00°09' east 260' more or less to the south line of the N½ SE¼ NE¼ of said Section 1; thence east along said line 1320 feet more or less to the section line common to said Sections 1 and 6; thence north along said section line to the true point of beginning.

Klamath County Tax Lot No. R-4008-001A0-00400