04 SEP 17 AM11:30

RECORDING REQUESTED BY

Fred N. Lewis 301 S. Old Stage Road Mt. Shasta, CA 96067

AND WHEN RECORDED MAIL TO

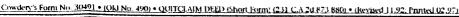
A.F.A., Inc. 301 S. Old Stage Road Mt. Shasta, CA 96067 Vol M04 Page 62352

State of Oregon, County of Klamath
Recorded 09/17/04 //:38 a m
Vol M04 Pg (2352-53
Linda Smith, County Clerk
Fee \$ 26 a # of Pgs 2

SPACE ABOVE THIS LINE FOR RECORDER'S USE

1	QUITCLAIM DEED
	Fred N. Lewis hereby remise, release and quitclaim
	A.F.A., Inc. (301 S. Old Stage Rd. Mt. Shasta, CA 96067)
	all my right, ritle and interest in the real property situated in the City ofChiloguin, ORCounty,—Caller or in an unincorporated area of)
	APN:R322957
	Property Address: 24325 Modoc Point Road Chiloguin, OR 97624
1	
	in the State ofCalifornia
	(Signature of Grantor) Fred N. Lewis (Typed Nanic)
	(for A.F. A., Inc.) Fred N. Lewis/Owner-Vice Pres

This document is only a general form which may be proper for use in simple transactions and in ne way acts, or is intended to act, as a substitute for the advice of an attorney. The printer does not make any warranty, either expressed or implied, as to the merchantability or fitness for a particular purpose, or as to the legal validity of any provision or the suitability of these forms in any specific transaction.





CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California	•
	ss.
County of Siskiyou	J
On August 27, 2004 before me, 2	Adrienne R Dorst, Notary Publ. Name and Title of Officer (e.g., "Jane Doe, Notary Public")
personally appeared <u>Fred N. Lewis</u>	
ADRIENNE R. DORST COMM. 1347755 NOTARY PUBLIC • CALIFORNIA SISKIYOU COUNTY My Comm. Expires March 22: 2006	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), of the entity upon behalf of which the person(s) acted, executed the instrument.
OPT	WITNESS my hand and official seal. According to Notary Public Signature of Notary Public
Though the information below is not required by law, it may pro-	ve valuable to persons relying on the document and could preven ent of this form to another document.
	ent of this form to another document.
Description of Attached Document	
Title or Type of Document: Ouitclaim De	ed
Document Date: 8/27/2004	Number of Pages: One
Signer(s) Other Than Named Above:	
Capacity(ies) Claimed by Signer	
Signer's Name:	FIGHT THUMBPRIF
☐ Individual	OF SIGNER Top of thumb here
Corporate Officer — Title(s):	
☐ Partner — ☐ Limited ☐ General ☐ Attorney-in-Fact	
☐ Trustee	
☐ Guardian or Conservator	