

'05 MAY 17 AM 3:33

State of Oregon, County of Klamath
Recorded 05/17/05 9:39 a m
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Linda Smith, County Clerk
Fee \$ 26⁰⁰ # of Pgs 2

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this _____ day of _____,

2005 (year),

by first party, Grantor,

Beverly Mae Worrick

whose post office address is

31 31 Net CT, Oxnard, CA 93035

to second party, Grantee,

William Andre Coltrin *pk*

whose post office address is

12060 Midway Dr, Tracy CA 95304

WITNESSETH, That the said first party, for good consideration and for the sum of
zero Dollars (\$0.00) paid by the said second party, the receipt whereof
is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party
forever, all the right, title, interest and claim which the said first party has in and to the following
described parcel of land, and improvements and appurtenances thereto in the County of,
Klamath State of Oregon to wit:

Property Description
Klamath Forest Estates, Block 16, Lot 47
Map: R-3510-014D0-1500-000
Code: 008

Page 1 of 2

[Signatures on following page.]

Initials of First Party

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Signature of Witness

Mura Mojica
Print name of Witness

Signature of Witness

Edgar Aifera
Print name of Witness

Signature of First Party, Grantor

Beverly M. Worrick
Print name of First Party

Signature of First Party, Grantor

Print name of First Party

STATE OF CALIFORNIA

COUNTY OF VENTURA

On MAY 5, 2005 before me, VERONICA SANCHEZ, NOTARY PUBLIC,
appeared BEVERLY MAY WORRICK, ONLY
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)

Affiant _____ Known _____ Produced ID _____
Type of ID CALIF. DL

Signature of Preparer

Print Name of Preparer

Address of Preparer

