## M05-64915

Klamath County, Oregon 09/23/2005 09:09:18 AM Pages 2 Fee: \$26.00

A298-10 R298-04

## **QUITCLAIM DEED**

THIS QUITCLAIM DEED, Executed this 22 day of Sept, 2005, by first party, Grantor, DAWN R Velazavez, Luis Velazavez) whose post office address is PD 136x 751 Chiloavin, Or 97624 to second party, Grantee, Rosemany J Ochow whose post office address is PO Box 751 Chiloavin, OR 97624

WITNESSETH, That the said first party, for good consideration and for the sum of Dollars (\$ // ) 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 Hlamath , State of Oregon to wit:

LOT 5 AND NORTH 25 FEET OF LOT 6 BLOCK 4, SOUTH CHILDQUID, NITHE COUNTY OF KIAMATH STATE OF OKEGON

ABAA (1)

Rev. 4/99

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.



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written. Signed, sealed and delivered in presence of	gned and sealed these presents the day and year first above
Signature of Witness Signature of Witness	Signature of First Party  Print name of First Party  NK  Signature Of First Party  Print name of First Party  NK  Signature Of First Party  Print name of First Party
Print name of Witness	Print name of First Party
Print name of Witness  Signature of Witness	Signature of First Party
Print name of Witness	Luis. Velazyuez Print name of First Party
State of CREGON  County of KLAMATH  On SEPT. 22, 2005 before me, appeared DAWN AND LUIS VELAZ personally known to me (or proved to me on the basis of is/are subscribed to the within instrument and acknowledge authorized capacity(ies), and that by his/her/their signature.	satisfactory evidence) to be the person(s) whose name(s)
authorized capacity(ies), and that by his/her/their signatu behalf of which the person(s) acted, executed the instrume WITNESS my hand and official seal.  Signature of Notary	
State of County of On before me, appeared personally known to me (or proved to me on the basis of s is/are subscribed to the within instrument and acknowledged authorized capacity(ies), and that by his/her/their signature behalf of which the person(s) acted, executed the instrument	Satisfactory evidence) to be the person(s) whose name(s) to me that he/she/they executed the same in his/her/their
WITNESS my hand and official seal.	
Signature of Notary	AffiantKnownProduced ID  Type of ID(See I)
	Signature of Preparer (Seal)
	Print Name of Preparer
	Address of Preparer
(2)	
If your state requires 8 1/2" x 11" forms, out off a	the best of the

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