

M05-70437

Klamath County, Oregon

12/06/2005 08:31:28 AM

Pages 2 Fee: \$26.00

Recording Requested By

And when recorded mail to:

Name DEBORAH FONSECA
Street Address 68631 PASADA ROAD
City CATHEDRAL CITY
State CA
Zip 92234

Space above this line for recorder's use

WOLCOTTS FORMS, INC.

WWW.WOLCOTTSFORMS.COM

SINCE 1893

GRANT DEED

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, I/We, Beatrice Fonseca

NAME OF GRANTOR(S)

grant to DEBORAH FONSECA

NAME OF GRANTEE(S)

all that real property situated in the City of KLAMATH FALLS, (or in an unincorporated area of) KLAMATH FALLS County, State of OREGON
described as follows LOT 30 BLOCK 35
KLAMATH FALLS FOREST ESTATES
Highway 66 UNIT, PLAT NO. 2

INSERT LEGAL DESCRIPTION

Assessor's parcel No. R462788
Dated 11-30-05
at Cathedral City CA
CITY AND STATE

Beatrice Fonseca
AUTOGGRAPH
Deborah Fonseca
AUTOGGRAPH
AUTOGGRAPH

Mail Tax Statement to:

DEBORAH FONSECA
68631 PASADA ROAD
Cathedral City
California, 92234

DOCUMENTARY TRANSFER TAX \$

CITY TAX \$

- ☐ Computed on full value of property conveyed, or
☐ Computed on full value less liens and encumbrances remaining at time of sale.
☐ Unincorporated area:
☐ City of
☐ Exempt

Autograph of Declarant or Agent Determining Tax

Firm Name

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REV. 10-04

INDIVIDUAL

STATE OF California }
COUNTY OF Riverside } SS.

On this 30th day of November in the year 2005, before me, Diana H. Sellin,
a Notary Public, duly commissioned and qualified in above said County and State, personally appeared
Beatrice Fonseca and Deborah Fonseca ☐ personally known to me or ☒ proved to me on this basis of
satisfactory evidence consisting of an identifying document or ☐ the oath of _____
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 same.

WITNESS my hand and official seal.

Diana H. Sellin
AUTOGRAPH



(Seal)

CORPORATE OR PARTNERSHIP

STATE OF _____ }
COUNTY OF _____ } SS.

On this ____ day of _____ in the year _____, before me, _____,
a Notary Public, duly commissioned and qualified in above said County and State, personally appeared
_____, ☐ personally known to me or ☐ proved to me on this basis of
satisfactory evidence consisting of an identifying document or ☐ the oath of _____ 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), as _____,
and that by his/her/their signature(s) on the instrument on behalf of _____,
a _____, organized under the laws of _____,
executed the same.

WITNESS my hand and official seal.

AUTOGRAPH

(Seal)