

NA

QUITCLAIM DEED

KNOW ALL MEN BY THESE PRESENTS, That Leland W. Woods, hereinafter called grantor,
for the consideration hereinafter stated, does hereby remise, release and quitclaim unto Bill J. Hunter and Susan Hunter, hereinafter called grantee, and unto grantee's heirs, succesors and assigns all of the grantor's right, title and interest in that certain real property with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in the County of Klamath, State of Oregon, described as follows, to-wit:

Lot 2 in Block 5 of Riverview, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

To Have and to Hold the same unto the grantee and grantee's heirs, successors and assigns forever.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$0

ⓐHowever, the actual consideration consists of or includes other property or value given or promised which is the whole part of the consideration (indicate which). ⓐ(The sentence between the symbolsⓐ, if not applicable, should be deleted. See ORS 93.030.)

In construing this deed, where the context so requires, the singular includes the plural and all grammatical changes shall be made so that this deed shall apply equally to corporations and to individuals.

In Witness Whereof, the grantor has executed this instrument this 23rd day of November, 2005; if a corporate grantor, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized thereto by order of its board of directors.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930.

Leland W. Woods
Leland W. Woods

STATE OF California, County of _____) ss.

This instrument was acknowledged before me on _____, 19_____, by _____

This instrument was acknowledged before me on _____, 19_____, by _____ as _____ of _____

Notary Public for California

My commission expires _____

Leland W. Woods
14121 Matney Rd.
Klamath Falls, OR 97603
Grantor's Name and Address
Bill J. Hunter and Susan Hunter
2176 Cable Ave.
Klamath Falls, OR 97601
Grantee's Name and Address
After recording return to (Name, Address, Zip):
Leland W. Woods
14121 Matney Rd.
Klamath Falls, OR 97603
Until requested otherwise send all tax statements to (Name, Address, Zip):
Bill J. Hunter and Susan Hunter
2176 Cable Ave.
Klamath Falls, OR 97601

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF OREGON, } ss.
County of _____

I certify that the within instrument was received for record on the _____ day of _____, 19_____, at _____ o'clock _____ M., and recorded in book/reel/volume No. _____ on page _____ and/or as fee/file/instrument/microfilm/reception No. _____, Record of Deeds of said County.

Witness my hand and seal of County affixed.

NAME TITLE
By _____, Deputy

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of

Los Angeles

} ss.

On 11/23/2005

Date

before me, Melinda I. Gonzalez, Notary Public

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

personally appeared

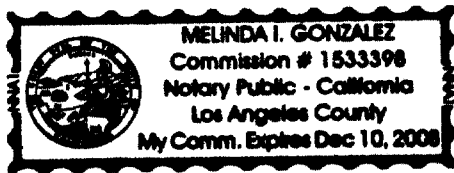
Leland W. Woods

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.

Melinda I. Gonzalez
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 Document

Title or Type of Document:

Quitclaim Deed

Document Date: 11/23/2005

Number of Pages: 1

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: Leland W. Woods

☒ 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

