(CI)

NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS.

JAMES J. BEVANS		
2365 Howard Drive		
Redding, CA 96001		
Grantor's Name and Address		
JAMES J. BEVANS & BEVERLY R.		
BEVANS, Trustees		
2365 Howard Dr., Redding, CA		
Grantee's Name and Address 96001		
After recording, return to (Name, Address, Zip):		
James & Beverly Bevans		
2365 Howard Drive		
Redding, CA 96001		
Until requested otherwise, send all tax statements to (Name, Address, Zip):		
James & Beverly Bevans, Trustee		
2365 Howard Drive		
Redding, CA 96001		

M05-71227

Klamath County, Oregon 12/16/2005 08:24:18 AM Pages 2 Fee: \$26.00

QUITCLAIM DEED		
KNOW ALL BY THESE PRESENTS that JAMES J. BEVANS		
hereinafter called grantor, for the consideration hereinafter stated, does hereby remise, release and forever quitclaim unto		
and phylidi K. BEVANS KEVOCABLE LIVING TROST		
on undivided one-half (1/2) interest in Lot 13, except the northerly 50 feet thereof, in Block 42 of HILLSIDE ADDITION in Klamath County, Oregon.		
To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever. The true and actual consideration paid for this transfer, stated in terms of dollars, is \$_0.00_GIFT		
ID TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST ACTICES AS DEFINED IN ORS 30.930.		
STATE OF OREGON, County of		
This instrument was acknowledged before me on, by		

Notary Public for Oregon

My commission expires _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California)	
County of Shasta)	
pro satisfa to be subscrackno execu author his/he instru upon execu	sonally known to me ved to me on the basis of actory evidence the person() whose name() is/are ribed to the within instrument and wledged to me that he/she/the/r ted the same in his/he/the/r rized capacity(i/s), and that by the/r signature() on the ment the person(), or the entity behalf of which the person(s) acted ted the instrument. JESS my hand and official seal.
COMM. EXPIRES SEPT. 4, 2009	Soral m Drues
Signate OPTIONAL	ure of Notary Public
Description of Attached Document	201
Title or Type of Document: (Quit c Vaim) Document Date: () (C 12 2005)	Number of Pages:
Signer(s) Other Than Named Above:	of Signer
☐ Other:Signer is Representing:	