

M06-08425

Klamath County, Oregon

05/01/2006 10:11:14 AM

Pages 2 Fee: \$26.00

┌ AFTER RECORDING ┐
SEND TO PAUL D. BOGGS
P.O. Box 387 SPRAGUE RIVER ORE
97639

┌ MAIL TAXES TO SAME
ADDRESS ┐

Above Space Reserved for Recording

[If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

Quitclaim Deed

Date of this Document: 5/1/06

Reference Number of Any Related Documents: _____

Grantor:

Name PAUL BOGGS & MONA BOGGS
Street Address 21025 MOCCSIAN LN CHILOQUIN
City/State/Zip OREGON CHILOQUIN OREGON 97624

Grantee:

Name PAUL D. BOGGS
Street Address 21025 MOCCSIAN LN
City/State/Zip CHILOQUIN OREGON 97624

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): N 1/2 SE 1/4 SW 1/4 SEC 28 T.5S.35S. R.10E.

OF THE WILLAMETTE MERIDIAN IN KLAMATH COUNTY

Assessor's Property Tax Parcel/Account Number(s): 3510-2800-01200-000

THIS QUITCLAIM DEED, executed this FIRST day of MAY,
2006, by first party, Grantor, PAUL BOGGS & MONA BOGGS, whose
mailing address is P.O. Box 387 SPRAGUE RIVER ORE 97639, to
second party, Grantee, PAUL D. BOGGS,
whose mailing address is P.O. Box 387 SPRAGUE RIVER ORE 97639.

WITNESSETH that the said first party, for good consideration and for the sum of ONE DOLLAR
Dollars (\$ \$1.00) 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 CLATSOP, State of OREGON to wit: _____

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

Signature of Witness _____

Print Name of Witness _____

Signature of Witness _____

Print Name of Witness _____

Signature of Grantor

Print Name of Grantor

PAUL D. BOGGS Mona D. Boggs
Paul D. Boggs Mona D. Boggs

State of OREGON

County of CLATSOP

On May 01, 2001, before me, Susie Costic, appeared Mona D. Boggs and Paul D. Boggs, 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.

Susie Costic
Signature of Notary



Affiant _____ Known _____ Produced ID _____
Type of ID _____
(Seal)