## 2008-014214 Klamath County, Oregon

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



Date of this Document: 10/16/08

FIVAN Kyniston

Reference Number of Any Related Documents: \_\_\_\_\_

Grantor:

Grancor.	The still of school
Name	Ivan + linda Kyniston
Street Address	3743 ONYX AVE
City/State/Zip	Klamath Falls, OR 97603
Grantee:	- · · · · · · · · · · · · · · · · · · ·
Name	IVan + Linda Kyniston
Street Address	3743 DAVX AVE
City/State/Zip	Klaunth Falls, OR 97603
Abbreviated Legi condo name) 子 とこく くく Assessor's Prope	al Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and . Setion of the S13 of Lot 12 Block & Altamont Hores lying Canal Inty Tax Parcel/Account Number(s): <u>3909-10 AB-1400</u>
· · · · · · · · · · · · · · · · · · ·	MDEED executed this day of $112 - 14 - 05$
THE AUTOMA	

THIS QUITCLAIM DEED, executed this	day of $12 - 14 - 05$
20, by first party, Grantor, // 4 y Kyngton	, whose
mailing address is 3 743 Chy XLAVE	K FA/15 97603 , to
second party Grantee //An /////	······································
whose mailing address is <u>3743</u> Dups Ave K	FA/15 97603

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© 2005 Socrates Media, LLC LF298-1 • Rev. 05/05 which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of \_\_\_\_\_\_\_, State of \_\_\_\_\_\_, State of \_\_\_\_\_\_, to wit: \_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_, State of \_\_\_\_\_\_, State of \_\_\_\_\_\_\_, State of \_\_\_\_\_\_, State of \_\_\_\_\_\_\_, State of \_\_\_\_\_\_, State of \_\_\_\_\_\_\_, State of \_\_\_\_\_\_, State of \_\_\_

\_\_\_\_\_

**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 Lenda Sue Lyniston
State of <u>OREGOAL</u> County of <u>FIAMAth</u>
On <u>10-16-08</u> , before me, <u><i>TVAN</i> FugENE AND</u> <u><i>hrNDA</i></u> <u>Suc</u> <u>KyN1stor</u> appeared <u><u>user</u></u> , 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. Signature of Notary Commension Engineer 3/10/2010
All in the second

Affiant \_\_\_\_\_ Known \_\_\_\_ Produced ID Type of ID \_\_\_\_\_\_ (Seal)

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