2009-007554 Klamath County, Oregon

06/01/2009 01:08:41 PM

Fee: \$26.00

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.] uitclaim Deed Date of this Document: Reference Number of Any Related Documents: Grantor: Name Street Address City/State/Zip ےGrantee: CAROLINE DORAN HONCLE Name Street Address 9762 City/State/Zip Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Bearing at the Northeast section corner of Section 31 Range 12 Edst of the Willamette Meridian; the 822 feet, thence East 300 feet, thence north 822 feet, Assessor's Property Tax Parcel/Account Number(s): THIS QUITCLAIM DEED, executed this whose 20<u>09</u>, by first party, Grantor, mailing address is _ second party, Grantee, / ORC whose mailing address is **WITNESSETH** that the said first party, for good consideration and for the sum of _ _____) 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,

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which the said first party has thereto in the County of to wit:	in and to the following de	scribed parcel of lan , St	id, and improve ate of(ements and appurtenanc つれららい	es
			,		_
IN WITNESS WHEREOF , the sealed and delivered in the pre	said first party has signed and sence of:	sealed these presents	s the day and ye	ear first written above. Sign	ed,
Signature of Witness					
Print Name of Witness		4	· (\mathcal{N}_{I}	
Signature of Witness			4 "		
Print Name of Witness			-7		_
Signature of Grantor Print Name of Grantor	Alva S. Pen HIVA S. Pen	delly so	A Conor	luc Porau 1	Pend
State of Oregon County of Mamath				. 1	
On June 1 20	before me	auline.	Mullead	010	
On <u>June!</u> Jo appeared <u>Canoline</u> T to me on the basis of satisfac	JONGH Pendell	rson(s) whose name	, personal	ly known to me (or prove	ed .
instrument and acknowledge	ed to me that he/she/they ex	xecuted the same in	his/her/their a	uthorized capacity(ies),	
and that by his/her/their sign person(s) acted, executed the	ature(s) on the instrument t	the person(s), or the	entity upon be	ehalf of which the	
WITNESS my hand and officia	7	· () 7		
	Mulendow				
Signature of Notary)	٠		
Affiant Known F Type of ID (O) L (Seal)	Produced ID				

