EOB NO PART OF ANY STEVENS NE	SS FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS.
Q1-11 1/11:	CONTRACTOR CARD CONTRACTOR CONTRA
Stella Kullianis 4261 Douglas Ave.	2012-001961
Klamath Falls OR 97601 Grantor's Name and Address	Klamath County, Oregon
The Stella Kallianis Trust	**************************************
Grantee's Name and Address	O0114367201200019610010014
After recording, return to (Name, Address, Zip):	FOR 02/23/2012 09:23:07 AM Fee: \$37.00
Stella Kallianis 4261 Opualas Am	Witness my hand and seal of County affixed.
Klamoth Falls, 02 97601	
Until requested otherwise, send all tax statements to (Name, Address, Zip):	NAME TITLE
Stella Kallianis Trustee 4 Stella Kallianis Trust	By, Deputy.
4261 Odualas Ave.	Dy, Dcpαty.
Klamath Falls, OR 97601	
	QUITCLAIM DEED
KNOW ALL BY THESE PRESENTS that Stella Kallianis	
herainafter called granter for the consideration herainafter	er stated, does hereby remise, release and forever quitclaim unto
The Stella Kallianis Trust	er stated, does nereby remise, release and forever quite and amo
<del>-</del>	essors and assigns, all of the grantor's right, title and interest in that certain
real property, with the tenements, hereditaments and ap	opurtenances thereunto belonging or in any way appertaining, situated in
•	
Lot L in Dlock 6, 31 EV	NART ADDITION, according to the
official plat thereof	on file in the office of the
County Clerk of Klamat	th County, Oregon,
J	J. 0
ENGLIM ROANCES! Ann	covenants, conditions, restrictions,
and easements of veco	M
(IF SPACE INSUFFICE TO Have and to Hold the same unto grantee and g	RENT, CONTINUE DESCRIPTION ON REVERSE)
The true and actual consideration paid for this tra	nsfer, stated in terms of dollars, is \$
actual consideration consists of or includes other propert	y or value given or promised which is □ part of the □ the whole (indicate
which) consideration. (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 execut	ted this instrument on $\frac{2/25/12}{}$ ; if
grantor is a corporation, it has caused its name to be sign to do so by order of its board of directors.	and its seal, if any, affixed by an officer or other person duly authorized
BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRA	NSFERRING AT MA
FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, U 195,300, 195,301 AND 195,305 TO 195,336 AND SECTIONS 5 TO 11, CH	APTER 424,
OREGON LAWS 2007. THIS INSTRUMENT DOES NOT ALLOW USE OF THE DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND STRUMENT OF A COEPTING THIS INSTRUMENT OF THE DESCRIPTION OF THE STRUMENT OF THE STRU	E LAWS AND
REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, TO ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE AFTER CONTROL OF LANNING DEPARTMENT TO VERIFY THAT THE UNIT OF LONG.	PROPRIATE AND REING
TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFIN 92.010 OR 215.010. TO VERIFY THE APPROVED USES OF THE LOT OR I	VED IN ORS
DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRADEFINED IN ORS 30 930 AND TO INQUIRE ABOUT THE RIGHTS OF NE	ACTICES, AS HIGHBORING
PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305	10 195.336
STATE OF OREGON, County of Klamath  This instrument was acknowledged before me on Favuary 23, 2012, by Stella Kallians	
This instrument was a	A 1/1 Carry
	cknowledged before me on
, , ,	
as of	Δ
OFFICIAL SEAL.	M/ inflamentary
MIEKE LYN VACCARO NOTARY PUBLIC - OREGON	Notary Public for Okegon
COMMISSION NO. 463450 MY COMMISSION EXPIRES NOVEMBER 08, 2015	My commission expires 16V 8 2015
MI COMMISSION EXPINED NOVEMBER 00, 2019	· · · · · · · · · · · · · · · · · · ·