2015-001999 Klamath County, Oregon



03/06/2015 12:26:09 PM

Fee: \$52.00

Recording requested by: <u>DENNIS DUNHAM</u> When recorded, mail to: AND SEND S  3990 DUSTY LN  CHIOQUIN, OR, 97624	Space above for Recorder's Use Only Title Order # Escrow #
	Document Prepared by:
Quitclair	n Deed
The undersigned Grantor(s) declare:	
The Document Transfer Tax is \$	
Assessor's Parcel #	
Assessor's Parcel #	<i>N</i>
Tax computed on full value of property conveyed, or	
Tax computed on full value less value of liens or encum	orances remaining at time of sale
This Quitclaim Deed is made on 39991 9M1	-15 LE RD CHILOGUIN, OR. 97624 between
Magnet Helicon Hellowyfy, Grantor(s), of Grantee(s), of 3991 9 MILE RD CHI O94IN, OR. 97624 (address).	
Mos Namalon (address),	and DENNIS DUNHAM.
Grantee(s), of 39991 9 MILE RD C	Hiloguin, OR. 97634 (address).
For valuable consideration, the receipt of which is hereband transfers all right, title, and interest held by the Graimprovements to the Grantee(s), and his or her heirs and LOT 16 BLOCK   TRACT 1118	by acknowledged, the Grantor(s) hereby quitclaims ntor in the following described real estate and d assigns, to have and hold forever, located at

Subject to all easements, rights of way, protective cover Taxes for the tax year of hall be prorated to recording of this deed.	
Dated: 1-16-15	
Mary J. M. Horty Signature or Grantor	Afathub Hullowny of
Asig Wansalan	Name of Grantor
State of California  County of S.S.	
On, before me,	SEE ATTACHED
	HOTARIAL VERTIFICATE
who proved to me on the basis of satisfactory evidence to	
scribed to the above instrument and acknowledged to me	e that they/he/she executed the instrument in their
his/her authorized capacity. I certify under penalty of pe	rjury under the laws of the State of California that
the foregoing is true and correct. Witness my hand and o	official seal.
Notary Signature	 Seal

## CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

(CALIFORNIA CIVIL CODE § 1189)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA  COUNTY OF	) )	
On Jan. 16 2015 before me, Donna (Date) (He		
subscribed to the within instrument and ackn in <u>his/her/their</u> authorized capacity(ies), and the person(s), or the entity upon behalf of wh	ry evidence to be the person(s) whose name(s) is/are lowledged to me that he/she/they executed the same that by his/her/their signature(s) on the instrument ich the person(s) acted, executed the instrument.	
I certify under PENALTY OF PERJURY under to paragraph is true and correct.	he laws of the State of California that the foregoing  DONNA NELSON Commission # 2050622 Notary Public - California	
WITNESS my hand and official seal.	San Bernardino County My Comm. Expires Dec 25, 2017	
Signature of Notary Public	(Notary Seal)	
ADDITIONAL OPTIONAL INFORMATION		
Description of Attached Document		
Title or Type of Document: Outclan	Dee J Document Date: 1.16.15	
Number of Pages: 2 Signer(s) Other Th	nan Named Above:	
Additional Information:		