

RETURN TO AND TAXES

:Prepared by: Michael Robert Love AKA Mike Robert Love
Address: P.O. Box 219, Chiloquin, OR 97624
Phone Number: 541-771-7783



00170208201500054900030036

05/28/2015 02:08:40 PM

Fee: \$52.00

QUITCLAIM DEED

Know all Men by these Presents, that Michael Robert Love AKA Mike Robert Love (collectively "Grantor(s)"), for the consideration of Zero Dollars (\$0.00) received to his/her/their full satisfaction, grants with a full release of all rights of dower in the real property to **Michael Robert Love AKA Mike Robert Love as Trustee for the Michael Robert Love AKA Mike Robert Love Revocable Living Trust**, the same being dated May 24, 2015, ("Grantee"), Michael Robert Love AKA Mike Robert Love, whose tax mailing address is P.O. Box 219, Chiloquin, OR 97624.

The real property located at Chiloquin, Oregon, in Klamath County, Oregon, (per Klamath County Tax Assessor's Office in Klamath Falls, Oregon) described as follows:

TWP34 RNGE8, BLOCK SEC 21, TRACT POR NE4, ACRES 14.29, POTENTIAL ADDITIONAL. MAP: R-3408-021DO-00210-000 and,

TWP34 RNGE8, BLOCK SEC 21, TRACT E2SE4 POR, ACRES 28.02, POTENTIAL ADDITIONAL. MAP: R-3408-021DO-03000-000.

Subject to restrictions, conditions, limitations, reservations and easements, if any, of record.

**Klamath County Tax Account Numbers: R886674 and R207573
Prior Recording: March 15, 2007 (Instrument number 07004809)**

To have and to hold the above-granted and bargained premises, with the appurtenances thereunto belonging, unto Grantees, their heirs and assigns forever.

IN WITNESS WHEREOF I/we have hereunto set my/our hand(s), on the 24th day of May, 2015.

Initial: 

SIGNED IN THE PRESENCE OF:

Angela Garcia
Angela Garcia
Signed and printed name of witness

Devin L Perkins
Devin L Perkins
Signed and printed name of witness

[Signature]
Signature of Seller/Grantor

Signed and printed name of witness

Signature of other Seller/Grantor (if applicable)

Signed and printed name of witness

Signed and printed name of witness

Signature of other Seller/Grantor (if applicable)

Signed and printed name of witness

Signed and printed name of witness

Signature of other Seller/Grantor (if applicable)

Signed and printed name of witness

[ACKNOWLEDGEMENT ON FOLLOWING PAGE]

Initial [Signature]

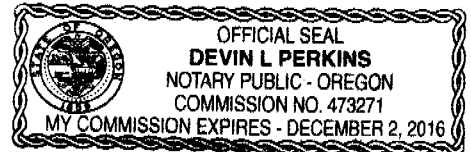
ACKNOWLEDGEMENT

STATE OF Oregon }
COUNTY OF Wlammath } SS:

Before me, a Notary Public in and for said County and State, personally appeared each of the person or persons listed above as Seller(s)/Grantor(s), who acknowledged that she/he/they did sign the foregoing instrument and that the same is her/his/their free act and deed.

In Testimony Whereof I have hereunto set my hand and official seal, at Wlammath Falls OR, this 28 day of May, 2015.

Devin L Perkins
Notary Public



My commission expires on: 12-2-2016

Personally known to me _____ or
Produced Identification x (Type of ID produced: drivers license)

Initial MP