2015-012684 Klamath County, Oregon



**QUIT CLAIM DEED** 

11/20/2015 11:01:59 AM

Fee: \$47.00

Erika Jones, Grantor, releases and quitclaims to Erika Jones Revocable Living Trust, Grantee,

all right, title and interest in and to the following descri	bed real property:	_
all right, title and interest in and to the following descrition 2116 Warring Street, Klamath Falls, Oregon 97601 MAP:R-3809-028DC-04900-000	Legal Description:	<u></u>
CODE:001 Account: 2374927	Dixon, BLOCK 5,	
ACCIONT: KJ/T-IZ/	LOT 21 E 40	

ORS 93.040 (Mandatory statements for sales agreements, earnest money receipts or other instruments for conveyance of fee title to real property) (1).

The true consideration for this conveyance is \$ 0.00.

ORS 93.030 (Contracts to convey, instruments of conveyance and related memoranda to state consideration).

Dated this 8th day of October, 2015.

Grantor Signed: Dilla Decument

Grantor: Erika Jones 6022 Spanish Trail Cove, Banning, CA 92220

Send Tax STATEMENT TO Return Document to Counter to

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 personally appeared Name(s) of Signer(s) who 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 be/she/they executed the same in his/her/their authorized capacity(ies); and that by hie/her/their signature(s)-on the instrument the person(e), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. SHEILA HOBBS WITNESS my hand and official seal Commission. # 2074899 Notary Public - California **Riverside County** Signature My Comm. Expires Aug 14, 2018 Notary Public Place Notary Seal Above **OPTIONAL** Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. **Description of Attached Document** Document Date: Number of Pages: / Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Erika Jowes Signer's Name: ☐ Corporate Officer — Title(s): □ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Partner — ☐ Limited ☐ General ☑ Individual ☐ Attorney in Fact ☐ Individual ☐ Attorney in Fact ☐ Trustee ☐ Guardian or Conservator □ Trustee ☐ Guardian or Conservator ☐ Other: ☐ Other: Signer Is Representing: Signer Is Representing: