

2017-010863

Klamath County, Oregon



00210597201700108630030038

09/25/2017 03:18:14 PM

Fee: \$52.00

Prepared by:

Doug Lawnicki
1916 Heitzman Way
Eugene, OR 97402

Mail Deed and Tax Statement to:

Fred Goetzke
122 Cypress Point Road
Half Moon Bay, CA 94019

PIN#

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 20 day of SEPTEMBER, 2017, by the Grantor(s),

DOUG LAWNICKI
1916 HEITZMAN WAY,
EUGENE, OR 97402

to the Grantee(s), Fred Goetzke
122 Cypress Point Road
Half Moon Bay, CA 94019

WITNESSETH, that the said Grantor, for Consideration of \$45,000 in form of note forgiveness

the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said Grantee forever, all the right, title, interest and claim which the said Grantor has in and to the following described parcel of Land, and improvements and appurtenances thereto in the County of Klamath, State of Oregon, legally described as:

If the full Legal Description will NOT fit in this space, Enter " See Exhibit A " then enter the description below.

1: Leisure Woods, Block 1, Lot 6
Map: R-2407-007B0-001900-00
Code: 051
Acct No: R146407

2: Leisure Woods, Block 1, Lot 7
Map: R-2407-007B0-1800-000
Code: 51
Acct No: R146390

3: Leisure Woods, Block 1, Lot 8
Map R-2407-007B0-01700-00
Code: 51
Acct No: R146292

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT

Returned at Counter

TO VERIFY THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930, AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, AND SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009.

Commonly known as:

IN WITNESS WHEREOF, The said Grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in presence of:

Signature [Signature]
Print Name DOUG LAWRENCE
Capacity: OWNER

Signature _____
Print Name _____
Capacity: _____

Signature _____
Print Name _____
Capacity _____

Signature _____
Print Name _____
Capacity _____

STATE OF OREGON }

COUNTY OF SEASIDE }

{SEAL}

On this 21 day of SEP, 20 17 before me a notary public, personally appeared
KEN N. McADAMS

_____, known or identified to me to be the
person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged
to me he/she/they freely executed the same.

Notary Public State of OREGON

{SEAL}

Notary Public Signature [Signature]

Print Name KEN N. McADAMS

My Commission (is permanent) (expires): 10-24-2022

See Attachment
for Notary Seal

CALIFORNIA JURAT WITH AFFIANT STATEMENT**GOVERNMENT CODE § 8202**

- ☒ See Attached Document (Notary to cross out lines 1-6 below)
☐ See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

Signature of Document Signer No. 1

Signature of Document Signer No. 2 (if any)

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 Shasta

Subscribed and sworn to (or affirmed) before me

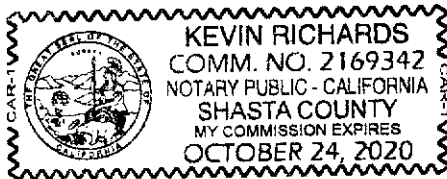
on this 20th day of SEP, 2017
by _____ Date Month Year

(1) Doug Lammock

(and (2) _____),

Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence
to be the person(s) who appeared before me.



Place Notary Seal Above

Signature _____

Signature of Notary Public

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

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____