TAXES to: Scott Jerome PARAZOO
PO BOX 923
Chilogiin, OR
97624

Quitclaim Deed

Fee: \$52.00

	ORDING REQUESTED B		aruz00			
	WHEN RECORDED MAI		Crantoo(o)			
2892=11	10TT J. Parazo	<u>u</u> +.3T ,(arantee(s)			
2 2 0	iloguin, DR.	27624				
<u>ان</u> د	1109011V, UK. 7	00				
Cons	ideration: \$ 3,000.	~				
Prop	erty Transfer Tax: \$ ssor's Parcel No.: #fN R	222994 Med	R-3507-	003AD-01	890 - 800	
Asse	PARED BY: MICHA	1 612 1	Zlack o	artifice baroin :	that he or she h	as prepared
PREI	ARED BI.	el alenn I	2 INCK	erunes nerem	illat tie or stie ti	ias proparca
this [Jeed.	er var i vi		5-16-	18	
Cian	ature of Preparer			Date of Prep		
•	·	121 V		Date 01. 10p		
	ichael Glenn ed Name of Preparer	Black				
Prim	ed Name of Freparer					
	S QUITCLAIM DEED, e			<u>క</u> in	the County o	f
<u></u> by 6	ane trantor(s) Micha	_ , State of <u>0</u> もし G l e へん	Kegon 131 Ack			1
<u></u> by 6	ane trantor(s) Micha	_ , State of <u>0</u> もし G l e へん	Kegon 131 Ack			1
by G who to G who	irantor(s), <u>Micha</u> se post office address i irantee(s), <u>Scoff</u> se post office address	, State of _O el Glenn is _285 = JParazo is _PO Box	18/4ck 32nd 923 C	St. Spr hilogui	ringfaeld, Of N. OR.	1
by G who to G who	irantor(s), <u>Micha</u> se post office address i irantee(s), <u>Scoff</u> se post office address	, State of _O el Glenn is _285 = JParazo is _PO Box	18/4ck 32nd 923 C	St. Spr hilogui	ringfaeld, Of N. OR.	1
by G who to G who	irantor(s), <u>Micha</u> se post office address irantee(s), <u>Scoff</u> se post office address in the sai	, State ofO el Glenn is 285 s JParazo is <u>PO Bo</u> X d Grantor(s),	Regon 131AcK 32nd 20 923 C Michael	St. Spr hiloqui Glenn	N, OR.	2, 97478 97624
by G who to G who WIT for g	irantor(s),Mise post office address is post office address is post office address in the sail pood consideration and	, State ofO el Glenn is _285 = S JParazo is _PO Box d Grantor(s), I for the sum of _	Regon 131AcK 32nd 20 923 C Michael Three Th	St. Spr hilogui Glenn ousand	N, OR. S BIACK Dollars	?, 97478 97624
by G who to G who WIT for G (\$	irantor(s),	, State ofO el Glenn is _285	Regan 13/ACK 3/2nd 20 923 C Michael Three The	St. Spr hilogui Glenn dusand ceipt whereof	Black Sollars is hereby ack	, <u>97478</u> , <u>9762</u> , ; ; ;
by G who to G who WIT for G (\$	irantor(s),Mise post office address is post office address is post office address in the sail pood consideration and	, State ofO el Glenn is _285	Regan 13/ACK 3/2nd 20 923 C Michael Three The	St. Spr hilogui Glenn dusand ceipt whereof	Black Sollars is hereby ack	97624 , mowledged,
by G who to G who WIT for G (\$	irantor(s),	, State ofO el Glenn is _285	Regan 13/ACK 3/2nd 20 923 C Michael Three The	St. Spr hilogui Glenn dusand ceipt whereof	Black Black is hereby ack	97624 nowledged,

interest and claim which the said Grantor(s) have	
land, and improvements and appurtenances there	eto in the County of Klamath,
State of Okagow and more specific	
to this Quitclaim Deed, which is attached hereto a	and incorporated herein by reference.
IN WITNESS WHEREOF, the said Grantor(s) has year first above written. Signed, sealed and deliv	
GRANTOR(S):	
Signature of Grantor	Signature of Second Grantor (if applicable)
Michael 6 Lenn Black	
Print Name of Grantor	Print Name of Second Grantor (if applicable)
Signature of First Witness to Grantor(s)	Signature of Second Witness to Grantor(s)
Print Name of First Witness to Grantor(s)	Print Name of Second Witness to Grantor(s)
GRANTEE(S):	
dul	
Signature of Grantee	Signature of Second Grantee (if applicable)
Print Name of Grantee	Print Name of Second Grantee (if applicable)
Signature of First Witness to Grantee(s)	Signature of Second Witness to Grantee(s)
Print Name of First Witness to Grantee(s)	Print Name of Second Witness to Grantee(s)

NOTARY ACKNOWLEDGMENT

State of <u>Chequity</u>
County of Lave
On 5-16-2018, before me, Shawn L Jans, a notary
public in and for said state, personally appeared, Mile Black + Scott
who are known to me (or proved to me on the basis of satisfactory evidence) to be the persons
whose names are subscribed to the within instrument and acknowledged to me that they ex-
ecuted the same in their authorized capacities, and that by their signatures on the instrument the
persons, or the entity upon behalf of which the persons acted, executed the instrument.
WITNESS my hand and official seal. OFFICIAL STAMP
Signature of Notary Affiant Known Produced ID SHAWN L JONES NOTARY PUBLIC-OREGON COMMISSION NO. 956144 MY COMMISSION EXPIRES NOVEMBER 22, 2020
Type of ID Drivers Cicen Set (Seal)