

RECORDING COVER SHEET

ORS 205.234

This cover sheet has been prepared by:

**2018-008474**

Klamath County, Oregon

07/17/2018 09:28:01 AM

Fee: \$87.00

Any error in this cover sheet DOES NOT affect the transaction(s) contained in the instrument itself.

Reference: _____

Please print or type information.

1 AFTER RECORDING RETURN TO –

Required by ORS 205.180(4) & 205.238:

Name: Donna C. PietrzakAddress: 1820 Donahue DriveCity, ST Zip: El Cajon, CA 92019

This document is being re-recorded at the request of AmeriTitle to correct the Grantee name as previously recorded in Vol M94, page 19075.

2 TITLE(S) OF THE TRANSACTION(S) – Required by ORS 205.234(1)(a)

Note: "Transaction" means any action required or permitted by law to be recorded, including, but not limited to, any transfer, encumbrance or release affecting title to or an interest in real property. Enter descriptive title for the instrument:

Document Title(s): Quitclaim Deed**3 DIRECT PARTY / GRANTOR Names and Addresses – Required by ORS 205.234(1)(b)**
for Conveyances list Seller; for Mortgages/Liens list Borrower/Debtor**Grantor Name:** Margaret L. Thornton**Grantor Name:** _____**4 INDIRECT PARTY / GRANTEE Names and Addresses – Required by ORS 205.234(1)(b)**
for Conveyances list Buyer; for Mortgages/Liens list Beneficiary/Lender/Creditor**Grantee Name:** Donna C. Pietrzak, Trustee or her Successors in Trust under the Donna C. Pietrzak Trust dated January 21, 1994, and any amendments thereto.**Grantee Name:** _____**5** For an instrument conveying or contracting to convey fee title, the information required by ORS 93.260:**UNTIL A CHANGE IS REQUESTED, ALL TAX STATEMENTS SHALL BE SENT TO THE FOLLOWING ADDRESS:**Name: NO CHANGE

Address: _____

City, ST Zip: _____

6 TRUE AND ACTUAL CONSIDERATION –
Required by ORS 93.030 for an instrument conveying or contracting to convey fee title or any memorandum of such instrument:**\$** 0**7 TAX ACCOUNT NUMBER OF THE PROPERTY if the instrument creates a lien or other interest that could be subject to tax foreclosure. – Required by ORS 312.125(4)(b)(B)**Tax Acct. No.: N/A

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO:

NAME
STREET
ADDRESS
CITY,
STATE
ZIPDonna C. Pietrzak
1820 Donahue Drive
El Cajon, Ca. 92019

Title Order No. _____ Escrow No. _____

STATE OF OREGON,
County of Klamath ss.

Filed for record at request of:

Donna C. Pietrzak

on this 17th day of June, A.D. 1994
at 9:48 o'clock PM and duly recorded
in Vol. M94 of Deeds Page 19075
Evelyn Biehn County ClerkBy Debbie Millendore Deputy.

INDEXED

Fee, \$30.00

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ 0

- ☐
- computed on full value of property conveyed, or
-
- ☐
- computed on full value less value of liens and encumbrances remaining at the time of sale.

Signature of Declarant or Agent Determining Tax.

Firm Name

Margaret L. Thornton

(print or type name of grantor(s))

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do I hereby remise,release and forever quitclaim to Donna C. Pietrzak, Trustee or her Successors in Trust under
THE DONNA C. PIETRZAK TRUST dated January 21, 1994,
and any amendments thereto.the following described real property in the City of Klamath Falls
County of Klamath, State of OregonLot 3 in Block 113, Klamath Falls Estates, Highway 66 Unit,
Plat No. 4, according to the official Plat thereof on file
in the office of the County Clerk of Klamath County, Oregon.Assessor's parcel No. R 3711 3600 18200 000 036Executed on JUNE 10th, 1994, at El Cajon, California

(City and State)

Margaret Lee ThorntonSTATE OF CaliforniaCOUNTY OF San Diego

ss.

On 6-10-94 before me, Melvyn Aguilar
(Name, title of officer-i.e., "Jane Doe, Notary Public")Notary Publicpersonally appeared Margaret Lee Thornton

~~personally known to me~~ (or 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 ~~he~~ ~~she~~ ~~they~~ executed the same in ~~his~~ ~~her~~ ~~their~~ authorized capacity~~(ies)~~, and that by ~~his~~ ~~her~~ ~~their~~ signature~~(s)~~ on the instrument the person~~(s)~~, or the entity upon behalf of which the person~~(s)~~ acted, executed the instrument.

WITNESS my hand and official seal.

Melvyn Aguilar
Signature

RIGHT THUMBPRINT (OPTIONAL)

TOP OF THUMB HERE

CAPACITY CLAIMED BY SIGNER(S)

- ☒
- INDIVIDUAL(S)
-
- ☐
- CORPORATE
-
- OFFICER(S) _____ (TITLE(S))
-
- ☐
- PARTNER(S)
-
- ☐
- ATTORNEY IN FACT
-
- ☐
- TRUSTEE(S)
-
- ☐
- GUARDIAN/CONSERVATOR
-
- ☐
- OTHER: _____

SIGNER IS REPRESENTING:
(NAME OF PERSON(S) OR ENTITY(IES))MAIL TAX STATEMENTS TO Donna C. Pietrzak 1820 Donahue Drive El Cajon, Ca. 92019
NAME ADDRESS ZIP