2019-011579 Klamath County, Oregon



10/04/2019 02:31:21 PM

Fee: \$97.00

Quitclaim Deed
RECORDING REQUESTED BY Jemster Lead
AND WHEN RECORDED MAIL TO: Jennifect Led
Grantee(s) KIAM Ath Falls, Or. 97601
Consideration: \$
Property Transfer Tax: \$ 001-01729
Assessor's Parcel No.: 3509-033CA-00400
PREPARED BY: certifies herein that he or she has prepared
this Deed. Dot 4, 2019
Signature of Preparer Date of Preparation
Dennifer L Leal
Printed Name of Preparer
THIS QUITCLAIM DEED, executed on $Cct4^{\pi i}$ in the County of
Klamath, State of Gregon
by Grantor(s) Patrick R Leal V
whose post office address is 318 EAST 215+, Tracy Ca 95376,
to Grantee(s). PLINITER L LEAS
whose post office address is 9/4 Owens St KlampHhalls 0/97601,
WITNESSETH, that the said Grantor(s),,
for good consideration and for the sum of
(\$) paid by the said Grantee(s), the receipt whereof is hereby acknowledged,
does hereby remise, release and quitclaim unto the said Grantee(s) forever, all the right, title

Exhibit "A"

Lot 12, B	lock6,	Indu	strial	Addition	to the	city of
KlamothFall	S. Acco	rding	to th	e office	I pot	then of
AN FIR in	the of	ice le	of the	Colony	Clerck	88/
Khumall	Coun	ty or	con.	<u> </u>		<u> </u>
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7.4					<u></u>	
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interest and claim which the said Grantor(s)	have in and to the following described parcel of
land, and improvements and appurtenances	thereto in the County of Klan AH11
	ecifically described as set forth in EXHIBIT "A"
to this Quitclaim Deed, which is attached her	
IN WITNESS WHEREOF, the said Grantor(s) year first above written. Signed, sealed and	has signed and sealed these presents the day and delivered in presence of:
GRANTOR(S):	•
fathird Liver	
Signature of Grantor	Signature of Second Grantor (if applicable)
Print Name of Grantor	
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):	
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>Ovegon</u>
County of Klamath.
on October 4, 2019, before me, Lisa M. Kessler, a notary
public in and for said state, personally appeared, Patrick Leal.
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.
Signature of Notary Commission expires: December 19, 2022.
Type of ID (A. Driver lie.) OFFICIAL STAMP LISA MARIE KESSLER NOTARY PUBLIC-OREGON COMMISSION NO. 982076
MY COMMISSION EXPIRES DECEMBER 19, 2022

CIAL STAMP ARIE KESSLER PUBLIC-OREGON SION NO. 982076 PRES DECEMBER 19, 2022