Code: 072

Prepared By Name: Steven A Werdeman	2021-006876 Klamath County, Oregon 00279247202100068760030039	
Address: PO Box 504027SAn Diego.		
State: CA. Zip Code: 92150	05/03/2021 01:28:50 PM	Fee: \$92.00
After Recording Return To And tax statements Name: Shelley L Aitchison Address: 24133 Ruffled Grouse Ln Chiloquin		
State: ORZip Code: 97624		
	Space Above This Line for Recorde	r's Use
OREGON QUIT	CLAIM DEED	
STATE OF OREGON		
COUNTY OF Klamath		
KNOW ALL MEN BY THESE PRESENTS, The residing at PO Box 504027. County of Sandard County of Sandard County of Sandard County of California. (hereinafter releases and quitclaims to Shelley L Aitchison Ln, County of Klamath, City of (hereinafter known as the "Grantees (\$8,000.00) and releases all the following described real estate, situated in the Oregon to-wit:	n Diego, City of San Dier known as the "Grantor(s)") hereby n. , residing at 24133 Ruffled Grouf Chiloquin, State of Ore (s)") for the sum of Eight Thousand one rights, title, interest, and claim in o	iego use egon dollars
Klamath Forest Estates 1st addition		
Block 26. Lot 10 Map: 3510-023D0-02300		

2024 006076

To have and to hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever for the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

"BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300 (Definitions for ORS 195.300 to 195.336), 195.301 (Legislative findings) AND 195.305 (Compensation for restriction of use of real property due to land use regulation) TO 195.336 (Compensation and Conservation Fund) AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17. CHAPTER 855. OREGON LAWS 2009. AND SECTIONS 2 TO 7. CHAPTER 8. OREGON LAWS 2010. 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 TO VERIFY THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 (Definitions for ORS 92.010 to 92.192) OR 215.010 (Definitions), 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 (Definitions for ORS 30.930 to 30.947), AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300 (Definitions for ORS 195.300 to 195.336), 195.301 (Legislative findings) AND 195.305 (Compensation for restriction of use of real property due to land use regulation) TO 195.336 (Compensation and Conservation Fund) AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010."

Grantor's Signature	Grantor's Signature
STEVEN A WERDEMAN	
Grantor's Name	Grantor's Name
Po Box 504027	
Address	Address
SAN DIEGO CA 92150	
City, State & Zip	City, State & Zip

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 San Diego	. }	
On April. 21. 2021 before me, _	JOUNG HEE KIM Notes, public (Here insert name and title of the officer)	
personally appeared STEVEN A WERDEMAN, 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 he/she/they executed the same in his/her/their authorized capacity(ies), and that by her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.		
I certify under PENALTY OF PERJURY the foregoing paragraph is true and cor	under the laws of the State of California that rect.	
WITNESS my hand and official seal. Notary Public Signature (No.	JOUNG HEE KIM COMM. # 2277258 NOTARY PUBLIC CALIFORNIA SAN DIEGO COUNTY MY COMM. EXP. MAR. 8, 2023	
ADDITIONAL OPTIONAL INSCRIPTION	INSTRUCTIONS FOR COMPLETING THIS FORM	
DESCRIPTION OF THE ATTACHED DOCUMENT Organ Quit Claim Dad (Title or description of attached document)	This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.	
(Title or description of attached document) (Title or description of attached document continued)	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which 	
1//51	must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of	
CAPACITY CLAIMED BY THE SIGNER individual (s) Corporate Officer	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a 	
(Title) □ Partner(s) □ Attorney-in-Fact □ Trustee(s) □ Other	sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date.	
Other	Indicate the capacity claimed by the signer. If the claimed capacity is a	

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

Securely attach this document to the signed document with a staple.

2015 Version www.NotaryClasses.com 800-873-9865