

Returned at Counter

2021-014948
Klamath County, Oregon



10/04/2021 10:22:25 AM

Fee: \$97.00

Prepared By

Name: Jason M. Botelho
Address: 34630 Sprague River
Rd, Sprague River
State: OR Zip Code: 97639

After Recording Return To

Tax Statements
Name: Jason M. Botelho
Address: 34630 Sprague River Rd
Sprague River
State: OR Zip Code: 97639

Space Above This Line for Recorder's Use

OREGON QUIT CLAIM DEED

STATE OF OREGON


COUNTY OF Klamath

KNOW ALL MEN BY THESE PRESENTS, That Jeremy M. Lacy, a Single Male, residing at 34630 Sprague River Rd, County of Klamath, City of Sprague River, State of OR (hereinafter known as the "Grantor(s)") hereby releases and quitclaims to Jason Michael Botelho, a Single Male, residing at 34630 Sprague River Rd, County of Klamath, City of Sprague River, State of OR (hereinafter known as the "Grantees(s)") for the sum of \$17000.00 (\$17000.00) and releases all the rights, title, interest, and claim in or to the following described real estate, situated in the County of Klamath, Oregon to-wit:

The West Half of South Half of North Half of Southwest Quarter of Southwest Quarter of Section 25, Township 36 South, Range 11 East of the Willamette Meridian, Klamath County, Oregon

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
Jeremy M. Lack
Grantor's Name
PO BOX 534
Address
Willow Creek Ct. 95573
City, State & Zip

Grantor's Signature

Grantor's Name

Address

City, State & Zip

See Attached California
All-Purpose Acknowledgment

STATE OF OREGON)

COUNTY OF _____)

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that _____ whose names are signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of the instrument, they, executed the same voluntarily on the day the same bears date.

Given under my hand this _____ day of _____, 20____.

Notary Public

My Commission Expires: _____

**See Attached California
All-Purpose Acknowledgment**

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 DEL NORTE

} s.s.

On October 1st, 2021 before me, Sheila M. Coop, Notary Public,
Name of Notary Public, Title

personally appeared Jeremy M. Lacy
Name of Signer (1)

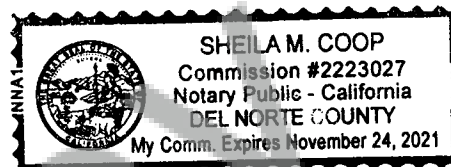
Name of Signer (2)

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 ~~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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Sheila M. Coop
Signature of Notary Public



Seal

OPTIONAL INFORMATION

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document titled/for the purpose of oregon quit claim Deed

containing 4 pages, and dated October 1st, 2021

The signer(s) capacity or authority is/are as:

- ☐ Individual(s)
☐ Attorney-in-fact
☐ Corporate Officer(s)

Title(s)

- ☐ Guardian/Conservator
☐ Partner - Limited/General
☐ Trustee(s)
☐ Other:

representing:

Name(s) of Person(s) Entity/ies Signer is Representing

Add. Optional Information

Method of Signer Identification

Proved to me on the basis of satisfactory evidence:

☒ form(s) of identification ☐ credible witness(es)

Notarial event is detailed in notary journal on:

Page # 40 Entry # 2

Notary contact:

Sheila M. Coop

Other

☐ Additional Signer ☒ Signer(s) Thumbprints(s)

☐ on File in Notary journal