Prepared By

Name: Michael Agliolo

Address: 2196 Oak Park Ave

Chico

State: California Zip Code: 95928

After Recording Return To

Tax statements
Name: Michael Agliolo

Address: 2196 Oak Park Ave

Chico

State: California Zip Code: 95928

2022-011299 Klamath County, Oregon



09/19/2022 11:48:52 AM

Fee: \$92.00

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 Neil Robert Agliolo, a United States citizen residing at 5979 Flamingo, County of Klamath, City of Bonanza, State of Oregon (hereinafter known as the "Grantor(s)") hereby releases and quitclaims to Michael Agliolo a United States citizen residing at 2196 Oak Park Ave. County of Butte, City of Chico, State of California (hereinafter known as the "Grantees(s)") for the sum of (\$ One Dollar) 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:

5979 Flamingo, Bonanza, Oregon. 97623 KLAMATH FALLS FOREST ESTATES HWY 66 PLAT #2, BLOCK 41, LOT 11

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."

195.336), 195.301 (Legislative findings) AND	
use of real property due to land use regulation	
Conservation Fund) AND SECTIONS 5 TO	
SECTIONS 2 TO 9 AND 17, CHAPTER 855	
2 TO 7, CHAPTER 8, OREGON LAWS 2010	J.
Mes Robert Adden	
Grantor's Signature	Grantor's Signature
Neil Robert Aglis10	
Grantor's Name	Grantor's Name
5979 Flamingo Dr.	
Address	Address
Bonan 29, OR 97623	
City, State & Zip	City, State & Zip
STATE OF OREGON)	
2011/17/25 2 1)	
COUNTY OF Butte)	
I, the undersigned, a Notary Public in and for	r said County, in said State, hereby certify
that Neil Robert Autoio	whose names are signed to the
foregoing instrument, and who is known to m	ne, acknowledged before me on this day
that, being informed of the contents of the in:	
voluntarily on the day the same bears date.	
0: 1 11: 36 1 6 6	
Given under my hand this 24 day of 25	2027
	ve findself
	ary Public - 1
COMM. #2350573 Notary Public - California Butte County	
Butte County My Comm. Expires Mar. 9, 2025 P My	Commission Expires: (\$/9/25
THE CONTRACT LADIES WAY, 9, 2025	

CALIFORNIA 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 Butte)
On Awy 29,2022 before me, Kariann Cullins, Notary Public, here insert name and title of the officer) personally appeared Neil Robert Agliolo
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. KARIANN COLLINS COMM. #2350573 Notary Public - California
WITNESS my hand and official seal. Butte County My Comm. Expires Mar. 9, 2025
Signature (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 documer
titled/for the purpose of Oregon Quit Chim Deed
containing pages, and dated
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) or Entity(ies) Signer is Representing

Additional Information	
1eth	nod of Signer Identification
Prove	ed to me on the basis of satisfactory evidence
\subset	form(s) of identification credible witness(es
Not	tarial event is detailed in notary journal on:
INUL	, ,
	Page # Entry #
Not	tary contact:
the	er
	_
	Additional Signer(s) Signer(s) Thumbprint(s)
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