

Prepared by same as grantor

BK0380PG0082

STATE MS.-DESOTO CO.

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SEP 25 11 59 AM '00

BK.380 PG.82
W.L. BAYNE JR. CLK.

A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 25th day of September, 2000 (year),
 by first party, Grantor, Kelly R Wood 280-5649-550-7260
 whose post office address is 3585 Heathcliff Hornlake ms 38637
 to second party, Grantee, Carrie L Wood 781-3543-481-2024
 whose post office address is 5879 Chickasaw Walls, ms 38680

WITNESSETH, That the said first party, for good consideration and for the sum of
 Dollars (\$1500.00) paid by the said second
 party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim
 unto the said second party forever, all the right, title, interest and claim which the said first party
 has in and to the following described parcel of land, and improvements and appurtenances there-
 to in the County of Desoto, State of Mississippi to wit:

See exhibit A

(1)

ATAA

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Rev. 6/00

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If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

Signature of Witness

Signature of First Party

Print name of Witness

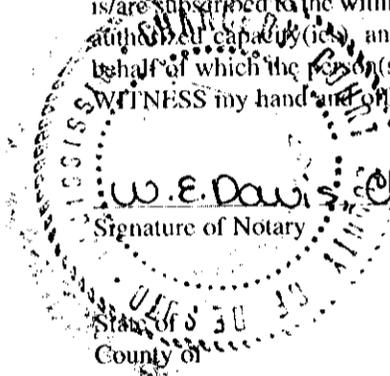
Print name of First Party

State of Mississippi)
County of DeSoto

On Sept. 25, 2000 before me,
appeared: Kelly R Wood AKA Kelly H Wood

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.



W.E. Davis Chancery Clerk
Signature of Notary by [Signature]

MY COMMISSION EXPIRES
JAN. 5, 2004

Affiant Known Produced ID
Type of ID _____
(Seal)

State of _____)
County of _____

On _____ before me,
appeared

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.

Signature of Notary

Affiant Known Produced ID
Type of ID _____
(Seal)

Signature of Preparer

Print Name of Preparer

Address of Preparer

(2)

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.

