49029 DEED OF RECONVEYANCE Vol. 78 KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that Page 11193 certain trust deed dated _____ certain trust deed dated _____June_is____, 19 11, executed and deducted by nd Sheila E. Haudenshild, husband & wife as grantor and recorded on _____June 22 _____, 19 73_, executed and delivered by Ronald L. Haudenshild conveying real property situated in said county described as follows: County, Oregon, in book M-73 at page 7901 _, *19 <u>73</u> .* Lot 3 in Block 4 of BRYANTS TRACT #2, accoring to the official plat thereof on file in the office of the County Clerk of Klamath County, having received from the beneficiary under said trust deed a written request to reconvey, reciting that the obligation secured by said trust deed has been fully paid and performed, hereby does grant, bargain, sell and convey, but without any covenant or warranty, express or implied, to the person or persons legally entitled thereto, all of the estate held by the undersigned in and to said described premises by virtue of said trust deed. In construing this instrument and whenever the context hereof so requires, the masculine gender includes the feminine and neuter and the singular includes the plural. IN WITNESS WHEREOF, the undersigned trustee has executed this instrument. DATED: _ May 25 , 19 78 Trustee STATE OF OREGON. County of Klamath May Personally appeared the above named William L. Sisemore anti-ities and acknowledged the foregoing instrunent 10 be his Voluntary act and deed. Beinding TCEAL TAILULA STATE OF OREGON. FICML Notary Public for Oregon County of __Klamath ss. I certify that the within instrument mission expires_ was received for record on the 26th_ day of ____ May day of <u>May</u>, 19 78, at <u>10:18</u> o'clock A. M., and recorded in book <u>M78</u> on page <u>1193</u> or as file/real number <u>49029</u> Haudenspild SPACE RESERVED FO 97601 FOR RECORDER'S USE Record of Mortgages of said County. NAME, ADDRESS, ZI Witness my hand and seal of nge is requested all tax statements shull be sent to the following address. County affixed. Va. V. Milne Recording Officer NAME. ADDRESS, ZIP By Bunetha theloch Deputy Fee \$3.00