72220

## DEED OF RECONVEYANCE

Vol. 79 Page 19165 KNOW ALL MEN BY THESE PRESENTS. That the undersigned trustee or successor trustee under that trust deed dated \_\_\_\_\_\_\_\_\_ February 6, 19 79, executed and delivered by \_\_\_\_\_\_\_ John A. Robinson certain trust deed dated \_ and Judith Robinson, his wife, as grantor and recorded on-in the Mortgage Records of Klamath County, Oregon, in book. February 7 19 79 . <u>M 79</u> at page \_ 2989 conveying real property situated in said county described as follows:

Lot 12, Block 3, KLAMATH RIVER ACRES, in the County of Klamath, State of Oregon,

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:August 10, 19_79.	<u>Dull</u>	la Dhan
<i>z</i>	1 <u></u>	Trustee
STATE OF OREGON, <u>County of Klamath</u> <u>August 10</u> , 19 79 <u>Personally appeared the above named</u> <u>William L. Sisemore</u>		
After recording return to: Certified_Mortgage_Co	SPACE RESERVED FOR RECORDER'S USE	STATE OF OREGON, County of <u>Klamath</u> I certify that the within instrument was received for record on the <u>10th</u> day of <u>August</u> . <u>19 79</u> . at <u>4:40</u> o'clock <u>P</u> M., and recorded in book <u>M79</u> on page <u>19165</u> or as file/reel number <u>72220</u> Record of Mortgages of said County. Witness my hand and seal of County affixed. <u>Wa. D. Milne</u>
Klamath Falls, Oregon 97.601 2 NAME, ADDRESS, ZIP Until a change is requested all fax statements shall be sent to the following address.		
NAME, ADDRESS, ZIP		By <u>Semethandhetsch</u> Depuis Fee \$3.50