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KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that certain trust deed dated _______ November 25 , 19 64 , executed and delivered by Elmer R. Anderson and Roberta J. Anderson, his wife, as grantor and recorded on ______ December 23 , 19 64 . in the Mortgage Records of Klamath ______ County, Oregon, in book 228 _____ at page 32 _____ conveying real property situated in said county described as follows:

Lots 8 and 9, Block 28, HOT SPRINGS ADDITION to the City of Klamath Falls, in Klamath County, 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: March 5 , 19 80.	- mill	2 lum
STATE OF OREGON.		Trustee
County of Klamath March 5 , 19 80		
Personally appeared the above named		
and acknowledged the foregoing instru- ment to be his voluntary act and deed.		STATE OF OREGON,
OFFICIAL Louis M. Faluss SEALS Notary Public for Oregon		County of Klamath I certify that the within instrumen
After recording return to:		was received for record on the 6th day of March , 19 30 at 10:36 o'clock A.M., and recorded
Lawrence L. Worlein _174 N. W. Ninth Street	SPACE RESERVED FOR RECORDER'S USE	in book M80 on page 4252 or as file/reel number 81527 Record of Mortgages of said County.
Toledo, Oregon 97391 NAME, ADDRESS, ZIP		Witness my hand and seal of County affixed.
Until a change is requested all tax statements shall be sent to the following address.		Wm. D. Milne
NAME, ADDRESS, ZIP		Recording Officer By Serve Tha Apelich Deputy

Fee \$3.50