DEED OF RECONVEYANCE

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KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that June 13 . 19 78 , executed and delivered by Fred A. Larson certain trust deed dated ___ June 13 , 19 78 , and Gladys E. Larson, his wife, ____ as grantor and recorded on County, Oregon, in book M78 __ at page __12581_ in the Mortgage Records of Klamath conveying real property situated in said county described as follows:

> Lot 8 in Block 1, BRYANT TRACTS NO. 2, according to the official plat thereof on file in the office of the County Clerk of 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. March 5 , 19 80 . DATED: _ Trustee STATE OF OREGON. County of Klamath March 5 Personally appeared the above named William L. Sisemore and acknowledged the foregoing instru-STATE OF OREGON. ment to be his voluntary act and deed. OFFICIAL LA WIS County of _ Klamath I certify that the within instrument Notary Public for Oregon was received for record on the 6th day of March . 19 30 . at 11:13 o'clock A.M., and recorded March My commission expires in book M30 on page 4257 or as file/reel number S1532 After recording return to: SPACE RESERVED FOR Record of Mortgages of said County. RECORDER'S USE Witness my hand and seal of NAME, ADDRESS, ZIP County affixed. il a change is requested all tax statements shall be sent to the following address. Recording Officer tha Afeta Deputy NAME, ADDRESS, ZIP