ı	89307	
	DEED OF RECONVEYANCE	
	KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under the and Mary Carlene Dunyard	
L	Siswing of Section 11, Township 30 South of beginning, being in the	
	Excepting therefrom any portion lying within Winter Avenue.	
secured by said trust deed has been fully paid and performed, hereby does grant, bargain, sell and convey, but withheld by the undersigned in and to said described premises by virtue of said trust deed.  In construing this instrument and all		
41	In construing this instrument and whenever the context hereof so requires, the masculine gender includes the IN WITNESS WHEREOF.	
	AN WITHER WITTER	

IN WITNESS WHEREOF, the unders a corporation, it has caused its corporate nam officers duly authorized thereunto by order of its DATED: Splender 44, 19 50.	igned trustee has executed this instrument; if the undersigned is e to be signed and its paperate seed to be affixed hereunto by its
(If executed by a corporation, affix corporate seal)	D. L. HOOTS
(If the trustee who signs above is a corporation, use the form of acknowledgment opposite.)  (ORS STATE OF OREGON,	93.490) <i>Trustee</i>
County of KTAMAMIT	STATE OF OREGON, County of
, 19.50	Personally appeared
Personally appeared the above named	each for himself and not one for the other, did say that the former is the
ment to be described the toregoing instru- ment to be described woluntary act and deed.  OFFICIAL Seams C Danfoel SEAL)	and that the latter is the  secretary of  and that the seal affixed to the foregoing instrument is the corporation, of said corporation and that said instrument was signed and sealed in be- thalf of said corporation by authority of its board of directors; and each of them acknowledged said instrument to be its voluntary act and deed.

(OFFICIAL SEAL)

Notary Public for Oregon My commission expires:

SPACE RESERVED

RECORDER'S USE

OFFICIAL Agains Charge
SEAL)

U Notak Fublic for Oregon
My containion expires \$ 10-14-85

Patil & Marry Bunyard
4516 Winter
Klamath Falls, OR 97601

GRANTOR'S NAME AND ADDRESS
GRANTOR'S NAME AND ADDRESS
SOUND TO SOUTH OR & TORN AGEN

Security Savings & Loan Assn 222 South Sixth Street Klamath Falls, OR 97601

After recording return to:

Paul & Mary Bunyard 4516 Winter Klometh Falls, 97601 NAME, ADDRESS, ZIP

Until a change is requested all tax statements shall be sent to the following address.

NAME, ADDRESS, ZIP

## STATE OF OREGON,

County of .Klamath

I certify that the within instrument was received for record on the ...5th...day of ...September...., 19...80, at...3:55......o'clock P. M., and recorded in book/reel/volume No.....130.....on page. 16904 .... or as document/fee/file/ instrument/microfilm No. ..89307....., Record of Mortgages of said County.

Witness my hand and seal of County affixed.

.....Wm. D. Milne...