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DEED OF RECONVEYANCE

9287

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KNOW ALL MEN BY THESE PRESENTS. That the undersigned trustee or successor trustee under that certain trust deed dated ______August 15 _____19 77 , executed and delivered by <u>NILLIAM WALTER</u> COADY and MICHELE LAIRD COADY, husband & wife grantor and recorded on ______August 26, ______19 77 , in the Mortgage Records of _______Klamath _____County, Oregon, in book <u>M-77</u> at page 15804 .

Lot 4 in Block 29, FIFTH ADDITION TO KLAMATH RIVER ACRES, 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.

DATED: October 6 . 19 80 .

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Fee \$3.50

Trustee STATE OF OREGON. Klamath County of <u>October</u> 6 Personally appeared the above named William L. Sisemore _ and acknowledged the foregoing instrument to be his voluntary act and deed. 11 чy STATE OF OREGON. Before me; (OFFICIAL SEALT) Notary Public for Oregon Mar commission avaires SS. County of ___Klamath 0 I certify that the within instrument My commission expires was received for record on the _7th 11 - 2 - 83day of _____October____ ____. 19 <u>80</u>___ at 3:44 o'clock & M., and recorded cording retur in book <u>M80</u> on page 19368 or as */iii/ SPACE RESERVED 1.00 file/reel number _____90369 FOR RECORDER'S LISE Record of Mortgages of said County. MT 1 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 addr Wm. D. Milne **Recording Officer** NAME ADDRESS ZIP 1tsch Deputy By Demetha