91690

NAME, ADDRESS, ZIP

52 сr, -

Vol. M8 Pcgo 20765 DEED OF RECONVEYANCE KNOW ALL MEN BY THESE PRESENTS. That the undersigned trustee or successor trustee under that certain trust deed dated <u>August 14</u>. 19 79, executed and delivered by Eleanor R. Boshuizen, husband & wife as grantor and recorded on <u>August</u> as grantor and recorded on _____ August 15, Jan Boshuizen and in the Mortgage Records of ____ Klamath ___ County, Oregon, in book _____ at page _ conveying real property situated in said county described as follows: <u>79</u> 14 19476 Lot 9, Block 2, West Hills Homes, 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. October 23 DATED: 80 19 William 2 Trustee STATE OF OREGON. County of _____Klamath_ October 23 Personally appeared the above named William L. Sisemore, Trustee and acknowledged the foregoing instrument to be his volumary act and deed. Belove mart and acea. Belove mart -OFFICIAL EAL B Notary Public for Oregon STATE OF OREGON. SEAL) Alter recording return to: T ss. County of ___Klamath I certify that the within instrument 11-2-83 was received for record on the <u>24th</u> day of ______ . 19 _80 . at _9:52_ o'clock A M., and recorded in book <u>M80</u> on page <u>20766</u>or as file/reel number <u>91690</u> SPACE RESERVED 836 FOR RECORDER'S USE Record of Mortgages of said County. NAME, ADDRESS, ZIP Witness my hand and seal of Until a change is requested all fax statements shall be sent to the following address. County affixed.

Wm. D. Milne Recording Officer Actsch Deputy By Derse Tha Fee \$3.50