91693 DEED OF RECONVEYANCE Vol. 80 Page 20765 KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that October 15 , 19 79 . executed and delivered by LaTonne Miller as grantor and recorded on October 17 , 19 79 certain trust deed dated \_ in the Mortgage Records of \_\_\_\_ <u>Klamath</u> \_\_ County, Oregon, in book \_\_\_\_\_\_M79 conveying real property situated in said county described as follows: \_ at page \_ 4490 Lots 8 and 9 of Ponderosa Park, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon 52 نت Ţ #2 130 08° 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 23\_\_\_\_\_, 19 80\_. Trustee STATE OF OREGON. Klamath County of \_\_\_\_\_\_\_\_\_ October 23 and acknowledged the foregoing instrument to be his volugtary act and deed. ि ाहुल STATE OF OREGON. Before m2 ∵ Be OFFICIAL -jä SS. County of \_\_\_Klamath PU Boury Public for Oregon I certify that the within instrument My commission expires 11-2-83 was received for record on the <u>24th</u> 15 day of \_\_\_\_\_October \_\_\_\_\_. 19 8U . at \_\_\_\_\_\_October \_\_\_\_\_. 19 8U . at \_\_\_\_\_\_October \_\_\_\_\_. 19 8U . 20750 \_\_\_\_\_\_. 20750 \_\_\_\_\_. 48. ( <del>4</del> ) in book <u>M80</u> on page 20769 or as SPACE RESERVED file/reel number \_\_\_\_91693 FOR Record of Mortgages of said County. RECORDER'S USE Witness my hand and seal of NAME ADDRESS, ZI County affixed. Until a change is requested all tax statements shall be sent to the following address. Wm. D.Milne **Recording Officer** NAME ADDRESS ZIP to Deputy

Fee\_\$3.50\_