91697

0. N.Y.

100 ACT 21

DEED OF RECONVEYANCE

Vai

20773

80 KNOW ALL MEN BY THESE PRESENTS. That the undersigned trustee or successor trustee under that trust deed dated ______ May 28 , 19 80, executed and delivered by ______ LaTonne Miller certain trust deed dated

as grantor and recorded on _____ June 3, 19 80 in the Mortgage Records of Klamath County, Oregon, in book <u>M80</u> conveying real property situated in said county described as follows: at page 10034

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. Chiloquin, 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.

Willia

IN WITNESS WHEREOF, the undersigned trustee has executed this instrument.

19 ⁸⁰

October

DATED:

23

Trustee STATE OF OREGON. County of Klamath **October** 23 Personally Trustee __and acknowledged the foregoing instrument to be his voluntary act and deed. (¹); STATE OF OREGON. OFFICIAL SS. SEAL) County of _ Klamath Notary Public for Oregon I certify that the within instrument unity commission expires 11-2-83 was received for record on the <u>24th</u> day of <u>Octobe-r</u>. 19 <u>80</u>. at <u>9:53</u> o'clock A. M., and recorded ecording return to in book <u>M80</u> on page 20773 or as SPACE RESERVED file/reel number ____91697_ FOR Lan.t. Record of Mortgages of said County. RECORDER'S USE NAME, ADDRESS, ZIP Witness my hand and seal of County affixed. change is requested oil tax statements shall be sent to the following address. Wm. D. Milne Recording Officer NAME, ADDRESS, ZIP W Deputy Braller Fee \$3.50