38-01-1149 01-41646 539

## DEED OF RECONVEYANCE

Vol.<u>M81 Page</u> 10244 KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that trust deed dated \_\_\_\_\_\_\_ August 11 , 19 78 , executed and delivered by \_\_\_\_\_\_ Charles L. Brittain certain trust deed dated <u>Aug</u> and Ginger A. Brittain, his wife, \_\_\_ as grantor and recorded on \_\_\_\_ August 14 , 19<u>78</u>. in the Mortgage Records of \_\_\_\_ Klamath \_\_\_\_ County, Oregon, in book \_\_\_\_\_\_M78 \_\_ at page \_\_ 17809 conveying real property situated in said county described as follows:

Lot 54, Block 3, Tract No. 1064, FIRST ADDITION TO GATEWOOD, 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.

William 2 DATED: \_ June 5 , 19 81 . Trustee STATE OF OREGON, County of Klamath 7 \_\_\_\_\_June\_5\_\_. 19 Personally appeared the above named \_ William J. Sisemore ment to be his voluntary act and deed. OFFICIAL STATE OF OREGON. County of \_\_\_\_Klamath SEAL) Notary Public for Oregon I certify that the within instrument 1. My commission expires \_ was received for record on the <u>8th</u> SPACE RESERVED 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 Evelyn Biehn County Clerk **Recording Officer** By Deball Junga Deputy Fee \$3.50 NAME, ADDRESS, ZIP

SS.