	4	10-00145		
20208	DEED OF RECO		. ol. M83 Page 1917	
KNOW ALL MEN BY THESE F	PRESENTS, The May 12	at the undersigne	d trustee or successor trustee under that and delivered by <u>W. C. LINDMEIER</u>	
in the Mortgage Records ofK	as granton	r and recorded or County, Oregon,	<u>May 12</u> , 19 <u>82</u> , in book <u>M82</u> at page <u>5908</u> ,	
conveying real property situated in said cour	nty described as fo	ollows:		
of Blocks 2B and 3,	HOMEDALE, b ence North 43 feet; thence ne Northeast	eginning at t °30' West alc North 16°23' corner of sai	d Lot 10; thence	
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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: February 3_, 19 3	83.	- Willin 2 Securi		
			Trustee	
STATE OF OREGON, County of Klamath February 3, 19 83				
Personally appeared the above named				
and acknowledged the foregoing ment to be his soluntary act and deed.	ç instru-		STATE OF OREGON,	
(OFFICIAL Status M. Fal SEAL) Notery Public for Oregon	un		County of <u>Klamath</u> ss. I certify that the within instrument was received for record on the <u>8</u>	
My commission expires <u>2-5-85</u> Atter recording return to: Mh. WC. Lindmeur 5503 Walton Dr Klarnath Jallo, DR 97601 NAME ADDRESS, ZIP		FOR	day of <u>Feb</u> ,, 19 <u>83</u> , at <u>10:05</u> o'clock <u>A</u> M., and recorded in book <u>M83</u> on page <u>1917</u> or as file/reel number <u>20208</u> , Record of Mortgages of said County. Witness my hand and seal of County affixed. Evelyn Biehn county Clerk	
U NAME, ADDRESS, ZIP Until a change is requested all tax statements shall be sent to the foll				
NAME ADDRESS ZIP			By Bry Mc Line Deputy Fee \$4.00	

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