<u>m/T #12599</u> Vol. <u>M83</u> Page 11458 DEED OF RECONVEYANCE 25883 KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under the trust deed dated ________ August 11 , 19 82, executed and delivered by LESTER G, DUNN <u>August 11 , 19 82 ,</u> as grantor and recorded on _ certain trust deed dated _ and CAROLYN M. DUNN, his wife, __ at page __ 10351 ____ County, Oregon, in book <u>M82</u> in the Mortgage Records of Klamath conveying real property situated in said county described as follows: The EigNEigNEig of Section 20, lying South of the Sprague River Highway, in Township 36 South, Range 13 East of the Willamette Meridian, Klamath County, 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. Will 2 <u>July 18, 1983</u>. DATED: Trustee STATE OF OREGON, County of __Klamath July 18 . 19 Personally appeared the above named William L. Sisemore ment tobe his voluntary act and deed. STATE OF OREGON, Befoje me: County of __Klamath . FICIAL Lover. OF SEAL.

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I certify that the within instrument was received for record on the ________ Notary Public for Oregon day of July , 19 83. at 10:29 o'clock A M., and recorded My commission expires in book <u>M_83</u> on pagel<u>1458</u> or as file/reel number __25883____. SPACE RESERVED FOR Record of Mortgages of said County. RECORDER'S USE Witness my hand and seal of County affixed. NAME, ADDRESS. ZIP Evelyn Biehn, County Clerk Il be sent to the following address. **Recording** Officer No Change une_ Deputy By 📐 NAME, ADDRESS, ZIP 4.00 fee