<u> 11-08019 M/T 12762-L</u> 31358 Vol. M81 Page 20939 DEED OF RECONVEYANCE KNOW ALL MEN BY THESE PRESENTS. That the undersigned trustee or successor trustee under that certain trust deed dated August 23 , 19 68, executed and delivered by DONALD A. COFFMAN and KAREN KAY COFFMAN, his wife, as grantor and recorded on _____ August 27 ___. 19<u>_68_</u>, _ County, Oregon, in book _____M68___at page ___749___ conveying real property situated in said county described as follows: Lot 1 of Block 2 in SUNSET VILLAGE, 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. DATED: <u>December 1 , 19 83</u>. Willes \cap Trustee STATE OF OREGON. County of Klamath December 1 19 Personally appeared the above named William L. Sisemore and acknowledged the foregoing instrument to be his voluntary act and deed. . Ti Boja ÷., STATE OF OREGON, OFFICIAL CON ss. Notary Public for Oregon County of Klamath I certify that the within instrument My commission expires was received for record on the <u>8th</u> 1. F . . \hat{v} day of ______ _.*19*<u>83</u> at 8:40 o'clock A. M., and recorded Klamath First Federal in book <u>M83</u> on page20939 or as 540 Main Street SPACE RESERVED file/reel number 31358 FOR Klamath Falls, OR 97601 Record of Mortgages of said County. **RECORDER'S USE** NAME, ADDRESS, ZIP Witness my hand and seal of County affixed. s requested all tax statements shall be sent to the following address. Same Evelyn Biehn County Clerk **Recording Officer** NAME, ADDRESS, ZIF By tam Am Deputy Fee: \$4.00