23-28 MTC-12,9-16 DEED OF RECONVEYANCE Page 4575 Vol. M&Y 34692 certain trust deed dated ______ November 10, 19, 67, executed and E. MARIE OWENS, husband and wife, as grantor and recorded on ______ Klamath _____ County, Oregon, in book M 67 8844 _ at page _ in the Mortgage Records of _____ conveying real property situated in said county described as follows: Lots 1, 2, 3 and the Easterly 5 feet of Lot 4, Block 4, MOUNTAIN VIEW ADDITION to the City of Klamath Falls, Oregon, according to the official plat thereof on file in the records of Klamath County, Oregon, BUT HAN 21. ANI 11 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. Willin 7 DATED: _____ March 12_, 19_84. Trustee STATE OF OREGON, County of <u>Klamath</u> March 12 , 19 Personally appeared the above named William Ir. Sisemore STATE OF OREGON, ment to be his voluntary act and deed. OFFICIAL COTTANE: County of Klamath I certify that the within instrument was received for record on the 21stNotary Public for Oregon My commission expires _ day of <u>March</u>, 1984, at <u>11:15</u> o'clock <u>A</u> M., and recorded in book <u>M84</u> on page <u>457</u> for as file/reel number <u>34692</u> ÷# . The second SPACE RESERVED After recording return to: Klamath First Federal S & L FOR Record of Mortgages of said County. 540 Main Street RECORDER'S USE Witness my hand and seal of Klamath Falls, OR 97601 County affixed. NAME, ADDRESS, ZIP Evelyn Biehn. County Clerk Until a change is requested all tax statements shall be sent to the following address. **Recording** Officer Smith Deputy m NAME, ADDRESS, ZIP Fee: \$4.00