51228

h#03-11377

DEED OF RECONVEYANCE

M/T 1501

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KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that certain trust deed dated <u>September 26</u>, 19 <u>78</u>, executed and delivered by <u>ROLF R. VAN CAMP</u> and <u>SANDRA L. VAN CAMP</u>, his wife, as grantor and recorded on <u>September 27</u>, 19 <u>78</u>, in the Mortgage Records of <u>Klamath</u> County, Oregon, in book <u>M78</u> at page <u>21527</u>, conveying real property situated in said county described as follows:

Lot 22, Block 13, HOT SPRINGS ADDITION TO KLAMATH FALLS, 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.

DATED: _ July 17___, 19 85_. Trustee STATE OF OREGON, County of Klamath July 17 Personally appeared the above named _ William L. Sisemore 131, and acknowledged the foregoing instrunent to be his voluntary act and deed. STATE OF OREGON, $F_{i}(\mathbf{r})$ Before me: OFFICIAL County of Klamath ÁL) I certify that the within instrument Notary Public for Oregon 18th was received for record on the ______ day of ______ July My commission expires 85 day of at 1:53 _ , 19 o'clock <u>P</u> M., and recorded <u>M85</u> on page <u>11395</u> or as nber <u>51228</u> rolng return t in book_ Ramath First Fede SPACE RESERVED file/reel number . S40 Main FOR Record of Mortgages of said County. RECORDER'S USE Kigmeth Falls OR 97607 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** Deputy NAME, ADDRESS, ZIP By Irm Am Fee: \$5.00