## 63054

1# 04-11679

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DEED OF RECONVEYANCE

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Vol. M& Page 11241 KNOW ALL MEN BY THESE PRESENTS. That the undersigned trustee or successor trustee under that a trust deed dated \_\_\_\_\_\_ August 20 , 19 79 , executed and delivered by KALLOOR J. DEVASIA certain trust deed dated \_ and SARAMMA DEVASIA, his wife, 

 ife, \_\_\_\_\_\_as grantor and recorded on \_\_\_\_\_\_\_August 21 , 1979

 Klamath \_\_\_\_\_\_County, Oregon, in book \_\_M79 \_\_\_\_at page \_\_19867

in the Mortgage Records of \_\_\_\_\_ conveying real property situated in said county described as follows:

> Lot 8, Block 1, Tract No. 1099, ROLLING HILLS, 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.

\_\_, 19<u>\_86</u>\_.

DATED: \_

Willean.

Trustee

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBIED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OF ACCEPTING THIS INSTRUMENT. THIS PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES.

June 25

STATE OF OREGON,

County of Klamath June 25

Personally appeared the above named William L. Sisemore

\_ and acknowledged the foregoing instrument to be his voluntary act and deed.

Before me Ż OFFICIAL SEAL) Notary Public for Oregon My commission expires Kall Mrs. 6203 Pinto Ct. Klamath Falls, OR

NAME, ADDRESS 71

nge is requested all tax statements shall be sent to the following address.

NAME, ADDRESS, ZIP

SPACE RESERVED FOR RECORDER'S USE

Fee: \$5.00

STATE OF OREGON. SS. County of \_ Klamath I certify that the within instrument was received for record on the \_\_ <u>26th</u> day of \_ June \_\_\_\_. 19 \_\_\_\_. 4:18 o'clock P M., and recorded at \_\_ in book <u>M86</u> on page <u>11241</u> or as file/reel number \_\_\_\_\_63054 Record of Mortgages of said County. Witness my hand and seal of County affixed.

Evelyn Biehn, County Clerk **Recording** Officer Deputy