1#09-12713 11-11		·		
63648	<u>172</u>			
KNOW ALL MEN BY THESE PRE	DEED OF RECONV ESENTS, That th aber 12, 1984 as grantor and the Coun-	e undersigned	September 13	e under that <u>ARYSTRONG</u>
PARCEL 1:	, ,	12	n vook <u>1184</u> al page	158/7
A parcel of land located in Range 8 East of the Willamette M particularly described as follow Beginning at the N& corner of 1331.69 feet; thence S.89 53'25"E. to the continuing S.89 53'25"E. 55'26"W.668.86 feet; thence N.00" of beginning.	of said Sectio	on 7; thence	e S oc <sup>0</sup>	ng; eet
A parcel of land located in th Range & East of the Willamette Men particularly described as follows: Beginning at the E% corner of line of said Section N.00 39'28"W. thence N.65 51'40"W. 1336.12 feet; S.89 53'45"E. 1334.00 feet to the said East line S.00 39'28"E.665.12	said Section . 498.84 feet_	7; thence	along the East	-
having received from the beneficiary under said trust secured by said trust deed has been fully paid and per any covenant or warranty, express or implied, to the p the undersigned in and to said described premises by vir In construing this instrument and whenever the feminine and neuter and the singular includes the plural. IN WITNESS WHEREOF, the undersigned trus DATED:July 10 to 86	irtue of said trust of the context hereof	legally entitled leed. so requires, th	t thereto. all of the estate h	uthout
DATED: July 10 , 19 86 .	The has executed this instrument.			
THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS BEFORE SIGNING OR ACCEPTING THIS INSTELAWS AND PERSON ACOURING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH APPROVED USES STATE OF OR FOOT	<u>Wi</u>	llean.	2 Susan	-
STATE OF OREGON. County of Klamath		Tru	istee	-
nent to be his voltantary act and deed				
DEFICIAL LA VIL B. Falue		STATE OF	OREGON.	
Notary Public for Oregon My commission expires 2-5-89 Mr. & Mita, Jack Granston 2030 Round Lake Rd	SPACE RESERVED	day of J at 4:19 in book M8	w that the within instrument for record on the 14c fully . 19 86 o'clock P. M., and recorded	
SMATHES US OR 97661 NAME ADDRESS. ZIP a change is requested all tax statements shall be sent to the following address.	FOR RECORDER 5 USE	Witness County affixed		
NAME ADDRESS ZIP			lehn, County Clerk	
	Fee: \$5.00	By Par	2 Amill Deputy	
			-cze Deputy	