40-00128

BE ACT 24 AH

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67449

DIED OF RECONVEYANCE

Vol_M&_Page_ KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that certain trust deed dated October 17, 1983 , executed and delivered by _DONALD M. SQUIER and CORRIE E. SQUIER, his wife, ... as grantor and recorded on . in the Mortgage Records of __ October 17, 19 83 , Klamath ___ County, Oregon, in book M83 conveying real property situated in said county described as follows:

Lot 14 in Block 3 of THIRD ADDITION TO 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: _ October 16_, 19_86.

INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRI THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT Trustee STATE OF OREGON. County of ____Klamath October 16, 1986 Personally appeared the above named William L. Sisemore and acknowledged the foregoing instrument to be his ubluniary act and deed. Her STATE OF OREGON, NII OFFICIAL SPULL /M SEAL) Klamath County of _ Notary, Public for Oregon I certify that the within instrument My commission expires ____ 2-5 was received for record on the <u>24t</u>h Mr. Vanale SPACE RESERVED Harlan D 6106 FOR Klamell Falls OR RECORDER'S USE Record of Mortgages of said County. Witness my hand and seal of County affixed. intil a change is requested all tax statements shall be sent to the follow Evelyn Biehn, County Clerk **Recording Officer** NAME, ADDRESS, ZIP n Deputy Fee: \$5.00