

L# 03-07756

KCT K39855

79021

DEED OF RECONVEYANCE

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KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that certain trust deed dated June 2, 19 67, executed and delivered by NORMAN ROSE and MARTHA ROSE, husband and wife grantor and recorded on June 8, 19 67, in the Mortgage Records of Klamath County, Oregon, in book M 67 at page 4267, conveying real property situated in said county described as follows:

Lots 12 and 13 in Block 217 of MILLS SECOND ADDITION TO the City of Klamath Falls, Oregon, according to the official plat thereof on file in the records of Klamath County, Oregon.

'87 SEP 9 AM 11 15

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: September 3, 1987.

William L. Sisemore

Successor

Trustee

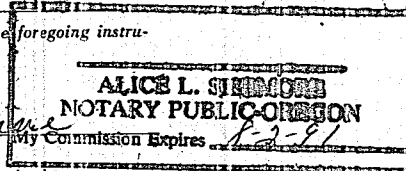
STATE OF OREGON,

County of Klamath } ss.
September 3, 1987.

Personally appeared the above named
William L. Sisemore

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

Before me:
(OFFICIAL SEAL) Alice L. Sisemore
Notary Public for Oregon
My commission expires 8/2/91



STATE OF OREGON, } ss.

County of Klamath

I certify that the within instrument was received for record on the 8th day of September, 1987, at 11:15 o'clock A. M., and recorded in book M87 on page 16259 or as file/reel number 79021, Record of Mortgages of said County.

Witness my hand and seal of County affixed.

Evelyn Biehn, County Clerk
Recording Officer

By Ann Smith Deputy

Fee: \$5.00

After recording return to:

Mr. & Mrs. Norman Rose
P.O. Box 5108
KFO 97603

NAME, ADDRESS, ZIP

Until a change is requested all tax statements shall be sent to the following address.

NAME, ADDRESS, ZIP