	IVEYANCE VOL MALPA	
KNOW ALL MEN BY THESE PRESENTS, That	the undersigned trustee or suc 5., executed and delivered by	Gle R. Johnston
know ALL Multipanuary 7	nty, Oregon, in book/##Matka #/########No	
	2	
(IF SPACE INSUFFICIENT, CONTINUE	DESCRIPTION ON REVERSE SIDE)	
aving received from the beneficiary under said trust deer wared by said trust deed has been fully paid and perfor-	d a written request to reconvey, med, hereby does grant, bargain	, reciting that the obligation n, sell and convey, but with ed thereto, all of the estate
cured by said trust deed has been any implied, to the p ut any covenant or warranty, express or implied, to the p eld by the undersigned in and to said described premise	erson or persons legally entried s by virtue of said trust deed. ntext hereof so requires, the ma	
eminine and neuter and the anguant	stee has executed this instru ioned and its corporate seal to	1. it the undersigned
IN WITNESS WHEREOF, the undersigned true a corporation, it has caused its corporate name to be s officers duly authorized thereunto by order of its Board DATED: September 28 , 19.87	igned and its corporate sear to of Directors. 010 Natio	
DATED:	Deborah	Gaskins
(If the trustee who signs above is a corporation, use the form of acknowledgment oppesite.) (ORS 93.490)	Tr TE OF OREGON, County of Mul	rustee 1tnomah) 25.
STATE OF OREGON, County of	Personally appeared Deborah.	Gaskinswho, being duly swo
Personally appeared the above named	dministrative Officer	HUS ALLE BOXDALLOI AMARK IN DRUMAN AND AREA THE AREA IN RECORDER DA XX
	Id National Bank I that the seal affixed to the forego said corporation and that said instr it of said corporation by authority o san acknowledged said instrument to	bing instrument is the corporate rument was signed and called in
Belore me: (OFFICIAL	Before mo:	1088 Ill exectional by a compare
SEAL) Notary Public for Oregon My commission expires	ty commission expires: APR 1	OF OREGON.
GRANTOR'S NAME AND ADDRESS	Count I ce	ertify that the within instrument for record on the 7th
(a) A second s second second sec second second s second second s second second se	of	October M. and reco
	SPACE RESERVED in book	Irent/volume No
GRANTEE'S NAME AND ADDRESS After recording return for E. G. Fahlgren 10660 S.W. Wilsonville Rd.	FOR page 18 RECORDER'S USE ment/m	/reel/volume No
Alles establing rature (g)	ron page 18 neconders use ment/m Record V County	/reel/volume No