ATC 32767 19706 DEED OF RECONVEYANCE Vol. mss_Page KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that trust deed dated ______April 25 ______, 19 <u>85</u>, executed and delivered by <u>MELVIN W. WATSON and</u> WATSON, hubband & wife ______ as grantor and recorded on ______<u>May 2 ______, 1985</u>, certain trust deed dated <u>April</u> NILA D. WATSON, husband & wife in the Mortgage Records of _____ conveying real property situated in said county described as follows: _ County, Oregon, in book ____ M85 at page 6491 Lot 56, Lamron Homes, County of Klamath, State of Oregon. 5 \square 2 NON 83 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. November 7 DATED: 19 88 hillen Trustee STATE OF OREGON, County of November Klamath Personally appeared the above named William L. Sisemore and acknowledged the foregoing instru-La rest. nent to be his voluntary, act and deed. TI Beforenth: STATE OF OREGON, (OFFICIAL CLE SEAL) emore D . 1 - Notary Public for Oregon My commission expires County of <u>Klamath</u> I certify that the within instrument 11 8/2/91 Alier recording return to: Mt & MTS. Melvin S214 Sturdivant was received for record on the <u>21st</u> day of _ Nov. at 10:53 o'clock AM.. and recorded _, 19 <u>88</u> in book <u>M88</u> on page <u>19706</u> or as SPACE RESERVED file/reel number <u>94097</u> Klemath Felli, OR 9760 FOR RECORDER'S USE Record of Mortgages of said County. NAME, ADDRESS, ZI Witness my hand and seal of Until a change is requested all tax statements shall be sent to the following address, County affixed. Evelyn Biehn, County Clerk **Recording Officer** NAME, ADDRESS, ZIE By Qauline Muelin alose Deputy Fee \$8.00