(19-Vol. mgg_Page 17844 5490 DEED OF RECONVEYANCE KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that certain trust deed dated <u>February 6</u>, 19 87, executed and delivered by <u>SCOTT D. McMAHON</u> and <u>DEANNA L. McMAHON</u>, husband & wife as grantor and recorded on <u>February 19</u>, 19 87. 2614 ___ County, Oregon, in book _____M87____at page . Klamath in the Mortgage Records of ____ conveying real property situated in said county described as follows: PARCEL 1 Lot 11, Block 8, THIRD ADDITION TO MOYINA, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. PARCEL 2 Lot 12, Block 8, THIRD ADDITION TO MOYINA, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. 37 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. mallen'z DATED: September 20 , 1989 . Trustee STATE OF OREGON, Klamath County of _ September 20 ersonally appeared the above named out schnovledged the foregoing instru-STATE OF OREGON, Bolowines 55 County of ____Klamath CIAL I certify that the within instrument AL.) (UI! My commission expires was received for record on the 21st 8/2/91 day of ______, 19 .89 , at 10:37 o'clock A M., and recorded in book <u>M89</u> on page <u>17844</u>or as M Scott D. M-Mchul SPACE RESERVED file/reel number _____ 5490 FOR 1427 Finera Record of Mortgages of said County. RECORDER'S USE Komatt Falle, OR 97603 Witness my hand and seal of County affixed. up is requested all fax statements shall be sent to the fell Evelyn Biehn, County Clerk **Recording Officer** -----By Cauline Much notare Deputy NAME ADDRESS ZIP Fee \$8.00

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