1 090 .39-1103 531 Vol.<u>mgo</u>Page_ DEED OF RECONVEYANCE 9968 as grantor and recorded on _____ certain trust deed dated _ ____ at page _____436 ____ County, Oregon, in book _ Klamath in the Mortgage Records of ____ conveying real property situated in said county described as follows: Lot 22 in Block 33 of Hot Springs Addition to the City of Klamath Falls, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. 23 0 E C 1 8 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. Willen _, 19 90 . January 8 DATED: _ Trustee STATE OF OREGON. County of Klamath 19 90 January 8 Personally appeared the above named William Lie Sisemore and acknowledged the foregoing instru-STATE OF OREGON, \$5. ment to be his volunitary as and deed. County of ___Klamath OFFICIAL I certify that the within instrument isenou was received for record on the <u>9th</u> Notary Public Igr Oregon (Ur ray SEAL) ... Notary Dublid for the . 19 90 . day of Jan. 19 90, at 3:23 o'clock P. M., and recorded Jan 8/2/91 in book <u>M90</u> on page 531 file/reel number <u>9968</u> _ or as SPACE RESERVED Record of Mortgages of said County. Jeffrey M. Laro 19105 Leroy St. FOR Witness my hand and seal of RECORDER'S USE OR 97603 County affixed. Klamath Falls NAME, ADDRESS Evelyn Biehn, County Clerk nts shall be sent to the foil **Recording** Officer atil a change is requested all tax states By Auline Mulenday Deputy NAME, ADDRESS, ZIP Fee \$8.00