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10167

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 SEPTEMBER 29, 1986, executed and delivered by TOMAS & PARRELL PEDERSEN AND ROBERT J AND LINDA BOGATAY as grantor and recorded on OCTOBER 13, 1986, in the Mortgage Records of KLAMATH County, Oregon, in book/reel/volume No. M86 at page 18649, or as document/fee/file/instrument/microfilm No. 67035 (indicate which), conveying real property situated in said county described as follows:

LOT 6, BLOCK 1, HARBOR ISLES TRACT #1209

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

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 singular includes the plural.

IN WITNESS WHEREOF, the undersigned trustee has executed this instrument; if the undersigned is a corporation, it has caused its name to be signed and its seal affixed by its officers, duly authorized thereto by its Board of Directors.

DATED: JANUARY 12, 1990

WILLIAM P. BRANDSNESS, TRUSTEE

(If executed by a corporation,
affix corporate seal.)

(If the trustee who signs above is a corporation,
use the form of acknowledgment opposite.)

STATE OF OREGON,

County of KLAMATH

} ss.

This instrument was acknowledged before me on
January 12, 1990, by

WILLIAM P. BRANDSNESS

STATE OF OREGON,

County of _____

} ss.

This instrument was acknowledged before me on _____

19____, by _____

as _____

of _____

Notary Public for Oregon

My commission expires: _____

Trustee

(SEAL)

(SEAL)

My commission expires: 9/16/93

PEDERSEN & BOGATAY

GRANTOR'S NAME AND ADDRESS

SOUTH VALLEY STATE BANK

GRANTEE'S NAME AND ADDRESS

After recording return to:

SOUTH VALLEY STATE BANK

801 MAIN STREET

KLAMATH FALLS OR 97601

NAME, ADDRESS, ZIP

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

NAME, ADDRESS, ZIP

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF OREGON,

County of Klamath

} ss.

I certify that the within instrument was received for record on the 15th day of Jan., 1990, at 10:33 o'clock A.M., and recorded in book/reel/volume No. M90 on page 980 or as fee/file/instrument/microfilm/reception No. 10167, Record of Mortgages of said County.

Witness my hand and seal of County affixed.

Evelyn Biehn, County Clerk

NAME

TITLE

By Pauline Muelenders Deputy

Fee \$8.00

90 JAN 15 AM 10 33