

OA

14319

mtc 226-1469
DEED OF RECONVEYANCEVol. m90 Page 8263

KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that certain trust deed dated February 16, 1976, executed and delivered by Donald L. Evans and Mary K. Evans husband and wife as grantor and recorded on February 17, 1976, in the Mortgage Records of Klamath County, Oregon, in book/reel volume No. m76 at page 2123, or as document/fee/file/instrument/microfilm No. 10258 (indicate which), conveying real property situated in said county described as follows:

Lot 10 of Valley View, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

(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 masculine gender includes the feminine and neuter and 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 corporate name to be signed and its corporate seal to be affixed hereunto by its officers duly authorized thereunto by order of its Board of Directors.

DATED: May 2, 1990, 19.....

Joe Green Investment Co., Successor of
Mountain Title Company

Trustee

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

(ORS 93.490)

STATE OF OREGON,)
County of) ss.
....., 19.....

STATE OF OREGON, County of Klamath) ss.
May 2, 1990

Personally appeared Jean Phillips and

Personally appeared the above named.....

..... who, being duly sworn, each for himself and not one for the other, did say that the former is the Special Vice-
..... president and that the latter is the secretary of Joe Green Investment
co. Successor of Mountain Title Company, a corporation, and that the seal affixed to the foregoing instrument is the corporate seal of said corporation and that said instrument was signed and sealed in behalf of said corporation by authority of its board of directors; and each of them acknowledged said instrument to be its voluntary act and deed.

Before me:
(OFFICIAL SEAL)
Notary Public for Oregon
My commission expires

Before me:
(OFFICIAL SEAL)
Notary Public for Oregon
My commission expires: DANA M. NIELSEN (If executed by a corporation, affix corporate seal)
NOTARY PUBLIC-OREGON

My Commission Expires 1/30/94

STATE OF OREGON,)
County of Klamath) ss.

I certify that the within instrument was received for record on the 2nd day of May, 1990, at 11:36 o'clock A.M., and recorded in book/reel/volume No. M90 on page 8263 or as fee/file/instrument/microfilm/reception No. 14319, Record of Mortgages of said County.

Witness my hand and seal of County affixed.

Evelyn Biehn, County Clerk
NAME TITLE

By Pauline Mulbride, Deputy

SPACE RESERVED
FOR
RECORDER'S USE

Fee \$8.00

GRANTOR'S NAME AND ADDRESS

GRANTEE'S NAME AND ADDRESS

After recording return to:

Mountain Title Company
222 So. 6th

NAME, ADDRESS, ZIP

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

NAME, ADDRESS, ZIP

90 MAY 2 AM 11 36

OREGON STATE HEALTH DIVISION
VITAL STATISTICS SECTION

MTC 1396-2047

STATE OF OREGON
OREGON STATE HEALTH DIVISION
DEPARTMENT OF HUMAN RESOURCES
Vital Records Unit
CERTIFICATE OF DEATH
ORS - 148

85-108623

189

DECEASED - NAME FIRST MIDDLE LAST Jack Richard DOUGLAS		DATE OF DEATH (MONTH, DAY, YEAR) April 25, 1985	
LOCAL FILE NUMBER 189		DATE OF BIRTH (MONTH, DAY, YEAR) April 8, 1927	
1 RACE WHITE, BLACK, AMERICAN INDIAN, ETC. (SPECIFY) White	2 SEX Male	3 AGE - LAST BIRTHDAY (YEARS) 58	4 UNDER 1 YEAR MO. DAYS 10 19
5 CITY, TOWN, OR LOCATION OF DEATH Sunriver	6 HOSPITAL OR OTHER INSTITUTION - NAME (IF NOT IN U.S.A., GIVE STREET & NO.) 55353 Big River Drive	7C IF DECEASED IN INSTITUTION, SPECIFY (SPECIFY) 7C	7D COUNTY OF DEATH Deschutes
7A STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) Oklahoma	7B CITIZEN OF WHAT COUNTRY USA	8 MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) married	9 SPOUSE (IF MARRIED, WIDOWED) Joan
10 SOCIAL SECURITY NUMBER 581 24 1512	11A USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) Manager Restaurant	11B KIND OF BUSINESS OR INDUSTRY Food	12 WAS DECEASED EVER IN U.S. ARMED FORCES? (SPECIFY YES OR NO) yes
13 RESIDENCE - STATE Oregon	13A CITY, TOWN, OR LOCATION Sunriver	13B STREET AND NUMBER OR R.F.D. ZIP 55349 Big River Drive 97701	13C INSIDE CITY no
14A FATHER - NAME FIRST MIDDLE LAST William Oscar Douglas	14B MOTHER - FIRST MIDDLE LAST (MARRIED NAME) Eva McChord	15 INFORMANT - NAME AND RELATIONSHIP TO DECEASED Joan Douglas Wife	
16 BURIAL, CREMATION, REMOVAL, MAUS. (SPECIFY) Burial	17 CEMETERY OR CREMATORY - NAME Greenwood Memorial Cemetery		
18A FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH (SIGNATURE) David L. Oakley	18B NAME AND ADDRESS OF FACILITY Niswonger-Reynolds, Inc. 105 N.W. Irving Bend, Oregon 97701		
19 CERTIFICATION - MEDICAL EXAMINER			
I CERTIFY THAT I MADE INQUIRY INTO THE DEATH OF THE DECEASED PERSON DESCRIBED ABOVE, AND IN MY OPINION DEATH RESULTED ON OR ABOUT:			
DEATH (HOUR) MONTH DAY YEAR about April 25, 1985 5:45 A.		FROM: NATURAL CAUSES <input type="checkbox"/> ACCIDENT <input type="checkbox"/> SUICIDE <input checked="" type="checkbox"/> HOMICIDE <input type="checkbox"/> UNDETERMINED <input type="checkbox"/> PENDING <input type="checkbox"/>	
21A CERTIFIER (SIGNATURE) Stephen L. Knapp MD	21B NAME - (TYPE OF PRINT) Stephen L. Knapp, M D		
21C MEDICAL EXAMINER FOR: Deschutes	21D DATE SIGNED (MONTH, DAY, YEAR) April 26, 1985		
22A DATE RECEIVED BY REGISTRAR (MO., DAY, YR.) April 29, 1985		22B (SIGNATURE) Jacqueline Mathis, Deputy	
23 PART I IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE OR (A), (B), AND (C))			
(a) Self inflicted gunshot wound			
(b) DUE TO, OR AS A CONSEQUENCE OF:			
(c) OTHER SIGNIFICANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (A)			
24 AUTOPSY (SPECIFY YES OR NO) no			
25 PART II DATE OF INJURY (MONTH, DAY, YEAR) April 25, 1985			
25A HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 21) Gunshot wound to chest		25B LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, COUNTY, STATE) Deschutes Oregon	
25C INJ. AT WORK (SPECIFY YES OR NO) no	25D PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY) 55353 Big River Dr.		
25E RESERVED FOR REGISTRAR'S USE			

Return: MTC - Pam

ORIGINAL - VITAL STATISTICS COPY

MOUNTAIN TITLE COMPANY, has recorded this instrument by request as an accommodation only, and has not examined it for regularity and sufficiency or as to its effect upon the title to any real property that may be described therein.

I CERTIFY THAT THIS IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE IN THE VITAL RECORDS UNIT OF THE OREGON STATE HEALTH DIVISION.

MAY 01 1990

DATE ISSUED

EDWARD J. JOHNSON II
STATE REGISTRAR

STATE OF OREGON: COUNTY OF KLAMATH: SS.

Filed for record at request of Mountain Title Co. the 2nd day of May A.D., 19 90 at 11:37 o'clock AM., and duly recorded in Vol. M90 of Deeds on Page 8264
By Evelyn Biehn County Clerk
By Carlene Mulendore

FEE \$8.00