

14620

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 MARCH 2, 1989, executed and delivered by FORREST R. CARTER, M.D. as grantor and recorded on MARCH 27, 1989, in the Mortgage Records of KLAMATH County, Oregon, in book/reel/volume No. M89 at page 5056, or as document/fee/file/instrument/microfilm No. 98435 (indicate which), conveying real property situated in said county described as follows:

LOTS 2 AND 3 IN BLOCK 4 OF THE RESUBDIVISION OF A PORTION OF MCLOUGHLIN HEIGHTS, 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 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: MAY 3, 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

This instrument was acknowledged before me on

May 3, 1990, by WILLIAM P. BRANDSNESS

STATE OF OREGON,

County of _____

This instrument was acknowledged before me on _____, 19____, by _____

as _____

of _____

Notary Public for Oregon

My commission expires: _____

Trustee

(SEAL)

FORREST R. CARTER, M.D.

GRANTOR'S NAME AND ADDRESS

SOUTH VALLEY STATE BANK

GRANTEE'S NAME AND ADDRESS

After recording return to:

SOUTH VALLEY STATE BANK801 MAIN STREETKLAMATH FALLS OR 97601

NAME, ADDRESS, ZIP

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

2301 N+Vieux Blvd
Klamath Falls OR 97601

NAME, ADDRESS, ZIP

STATE OF OREGON,

County of Klamath

I certify that the within instrument was received for record on the 9th day of May, 1990, at 9:49 o'clock AM, and recorded in book/reel/volume No. M90 on page 8796 or as fee/file/instrument/microfilm/reception No. 14620, Record of Mortgages of said County.

Witness my hand and seal of County affixed.

Evelyn Biehn, County Clerk

NAME

TITLE

By Randall M. Mullendare Deputy

Fee \$8.00

'90 MAY 9 AM 9 49