274:14	DEED OF RECONVEYANCE	Vol.ma/_Pa	age 5387
KNOW ALL MEN BY THESE P certain trust deed dated April 12 HEL W. McBRIDE, husband & wife	RESENTS, That the undersigned	trustee or successor trust and delivered by EVERETT	tee under that

090-03-10638

in the Mortgage Records of ______Klamath ______ as grantor and recorded on ______ April 20 _____, 19 77 _____, to match ______ County. Oregon, in book ______ at page ______, 6702 _____, conveying real property situated in said county described as follows:

Lot 16 in Block 6, THIRD ADDITION TO ALTAMONT ACRES, Klamath County, Oregon.

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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.

TO VERI

, 1991

DATED: __

STATE OF OREGON.

March 25

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND

REGULATIONS BEFORE SIGNING OR ACCEPTING THIS INSTRU PERSON ACOURING FEE TITLE TO THE PROPERTY SHOULD CH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT APPROVED USES.

-ille Successor Trustee

Trustee

Klamath County of _ March 25 Personally appeared the above named _________ William L. Sisemore ment to be his voluntary act and deed. EIGIAN CLERK STATE OF OREGON. ĩ SS. OFFICIAL CA County of _ Klamath ... Notary Public for Oregon I certify that the within instrument l_{n_i} 8/2/91 was received for record on the <u>26th</u> My commission expires _ 44 day of _ March ____, 19 _91 ___o'clock P___M., and recorded at .3:21 in book <u>M91</u> on page <u>5387</u> or as SPACE RESERVED file/reel number ____ 27414 FQR Record of Mortgages of said County. RECORDER'S USE NAME ADDRESS, ZIP Witness my hand and seal of County affixed. nge is requested all tax statements shall be sent to the following address. Evelyn Biehn, County Clerk **Recording Officer** NAME, ADDRESS, ZIP By Qaulin Mullindere Deputy Fee \$8.00