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29397 DEFD OF	RECONVEYANCE Vol. mg/ Page 9112
KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that certain trust deed dated	
LOT 2 BLOCK 2 OF TRACT 1002 - LAWANDA HIL IN THE OFFICE OF THE COUNTY CLERK OF KLAN	LLS, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE MATH COUNTY, OREGON.
•	
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 corporation, it has caused its name to be signed and it do so by its Board of Directors.	trustee has executed this instrument; if the undersigned is a seal affixed by an officer or other person duly authorized to
DATED: MAY 13	WILLIAM P BRANDSNESS, TRUSTEE
STATE OF OREGON, County This instrument was acl byWilliam P. Brand	knowledged before me on May 13 1991
This instrument was acl	
of	M. $I$ . $I$ . $M$ = $I$ . $I$ .
	Notary Public for Oregon  My commission expires 9/16/93/2
LEROY AND ANNA HULSEY	STATE OF OREGON,
	County of Klamath \ \rightarrow ss.

or Oregon L GRANTOR'S NAME AND ADDRESS I certify that the within instrument SOUTH VALLEY STATE BANK was received for record on the .14th day May\_ at .3:24..... o'clock ..P. M., and recorded in book/reel/volume No. M91 on page 2112 or as fee/file/instrument/microfilm/reception No. 29397, GRANTEE'S NAME AND ADDRESS SPACE RESERVED After recording return to: SOUTH VALLEY STATE BANK 801 MAIN STREET KLAMATH FALLS OR 97601 RECORDER'S USE Record of Mortgages of said County. 97601 Witness my hand and seal of NAME, ADDRESS, ZIP County affixed. Until a change is requested all fax statements shall be sent to the following address Evelyn Biehn, county Clerk By Auline Mulandere Deputy NAME, ADDRESS, ZIP Fee \$8.00