37913

## K-42517 DEED OF RECONVEYANCE Vol\_mg1

WMOTE ATT TOTAL	aye is to the
certain trust deed dated September 6	
James.J. Ulessner & Reverly 1 Classes	and delivered by
III the Mortgage Records of V1	aramor and recorded on October 3,
page199/5 or as document/for/file	odany, Olegon, in book, neery volume No. M90
conveying real property situated in said county describe	ed as follows: (indicate which),

The  $N_{2}^{1}N_{2}^{1}NE_{4}^{1}$  Section 36, Township 34 South, Range 8 East of the Willamette Meridian, lying Westerly of the Sprague River.

## (IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

having rece ved 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 an officer or other person duly authorized to do so by its Board of Directors.

7. 60 60			
DATED: November 22, , 19 91	KLAMATH	I COUNTY TITLE COMPANY	
The state of the s	By:	Ju ac Le 25	
775370	***************************************	President	*************
STATE OF OREGON, Count	trof vi	Trustee	
by	Knowledged before	e me on	, 19.7/,
This instrument was ac	knowledged before	me on November	, 1991,
TRUDIE DURANT	Title Company		• • • • • • • • • • • • • • • • • • • •
NOTARY PUBLIC - OREGON		rude Durant	****************
ES9 Commission Expires	My commission	Notary Public for expires 1/30//3	or Oregon
GRANTOR'S NAME AND ADDRESS		STATE OF OREGON,  County of Klamath  I certify that the within ins was received for record on the 26 of Nov. at 3:35 o'clock P. M., and r	th day
PER PER LIVING TRUST  C 63. BOX 5648  HILOQUIN, DR 97624  NAME, ADDRESS, ZIP	SPACE RESERVED FOR RECORDER'S USE	in book/reel/volume No. M91 page 24841 or as fee/file, ment/microfilm/reception No31 Record of Mortgages of said Cou Witness my hand and	/instru- 913
a change is requested all tax statements shall be sent to the following address.  20. Change		County affixed.  Evelyn Biehn, County C	<u>lerk</u>
NAME, ADDRESS, ZIP	Fee \$8.00	By autise Mullindere 1	Deputy