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40562

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 October 31, 1973, executed and delivered by Joel D. DeAvilla and Victoria M. DeAvilla, h & w as grantor and recorded on November 1, 1973, in the Mortgage Records of Klamath County, Oregon, in book/reel/volume No. M73 at page 14628, or as ~~corrected by the following description~~ (indicate which), conveying real property situated in said county described as follows:

Lot 10 in Block 14 of FAIRVIEW SECOND ADDITION to the City of Klamath Falls, 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 an officer or other person duly authorized to do so by its Board of Directors.

DATED: February 3, 1992.

Robert D. Boivin
Robert D. Boivin

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, } ss.
County of Klamath

This instrument was acknowledged before me on February 3, 1992, by

Robert D. Boivin

David Young
Notary Public for Oregon
My commission expires: 9-21-92

STATE OF OREGON, } ss.

County of _____

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

as _____

of _____

Notary Public for Oregon

My commission expires: _____

(SEAL)

Joel D. & Victoria M. DeAvilla

GRANTOR'S NAME AND ADDRESS

GRANTEE'S NAME AND ADDRESS

After recording return to:

Western Bank, ATTN: Carolyn Shellhamer
P.O. Box 869
Coos Bay, OR 97420

NAME, ADDRESS, ZIP

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

Neil & Karen Peacock

NAME, ADDRESS, ZIP

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF OREGON, } ss.
County of Klamath

I certify that the within instrument was received for record on the 3rd day of Feb., 1992, at 1:53 o'clock P.M., and recorded in book/reel/volume No. M92 on page 2264 or as fee/file/instrument/microfilm/reception No. 40562, Record of Mortgages of said County.

Witness my hand and seal of County affixed.

Evelyn Biehn, County Clerk

NAME

TITLE

By Paula M. Munk Deputy

Fee \$10.00

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