	. 21.22		٠
A Brake A		RECONVEYANCE	
والمعامدة	LPE.	RECURVEYANCE	,

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VAIOUR RT Services	
KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that co	
dated JUNE 18	ertain trust deed
dated	D PATRICIA
MARIE RITTER (HUSBAND AND WIFE) as grantor and recorded on	
the Mortgage records of KT.AMATH	19.86 in
the Mortgage records of KIAMATH County, Oregon, in book/recovering No	M86
Conveying real property gitted of its and its	indicate which)
conveying real property situated in said county described as follows:	,,

LOT 7 IN BLOCK 10 OF THE TERRACES, ACCORDING TO THE OFFICIAL PLAT THEREOF, ON FILE IN THE OFFICES OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON.

19D92	(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 masculine gender includes the feminine and neuter and the singular includes the plural.
A02-0	IN WITNESS WHEREOF, the undersigned trustee has executed this instrument; if the undersigned is a corporation, it has caused its corporate name to be signed and its corporate seal to be affixed hereunto by its officers duly authorized thereunto by order of its Board of Directors. DATED: FEBRUARY 20 19 92 CHICAGO TITLE INSURANCE COMPANY OF OREGON THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OF ACCEPTING THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OF ACCEPTING THIS INSTRUMENT THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPART. BY: S.ISAN BOURDAGE, Assistant Secretary
	(If the trustee who signs above is a corporation, use the form of acknowledgement opposite.) (ORS 93.490)
	STATE OF OREGON, County of CLACKAMAS) ss. FEBRUARY 20 10 92
	County of
A POPPOPPOR I (District Age	Personally appeared the above named
	SEAL) VOLUME COMMISSION NO. 011003 VOLUME COMMISSION NO. 011003
	CHICAGO TITLE INSURANCE 1000T SE SUMMYSIDE RD CLACKAMAS, Oregon 97015 GRANTOR'S NAME AND ADDRESS SAME AS GRANTOR ABOVE GRANTE'S NAME AND ADDRESS GRANTE'S NAME AND ADDRESS SPACE RESERVED FOR ROBERT AND PATRICIA RITTER ALZ5 DAMONT KLAMATH, OR 97601 NAME, ADDRESS, ZIP County of KLamath Ss. County of KLamath Ss. I certify that the within instrument was received for record on the 2nd day of
	Evelyn .BiehnCounty. Clerk

By Caulene Millendo & Deputy

NAME, ADDRESS, ZIP