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DEED OF RECONVEYANCE

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52102

KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that certain trust deed dated March 18, 1989, executed and delivered by Thomas J. Burns & Sharon R. Burns, as tenants by the entirety, as grantor and recorded on March 29, 1989, in the Mortgage Records of Klamath County, Oregon, in book/reel/volume No. M89 at page 5261, or as document/fee/file/instrument/microfilm No. 98548 (indicate which), conveying real property situated in said county described as follows:

North 1/2 of the East 1/2 of Lot 2, Block 12,
Klamath Falls Forest Estates Sycan Unit, as
recorded in Klamath County, 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: October 6, 1992

(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,

County of Klamath

This instrument was acknowledged before me on
October 6, 1992, by
Melvin D. Ferguson

(SEAL)

My commission expires: 10-8-93

Melvin D. Ferguson
Trustee

STATE OF OREGON,

County of _____

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

as _____

of _____

Notary Public for Oregon

My commission expires:

(SEAL)

Thomas J. and Sharon R. Burns
2699 Lakeshore Drive
Klamath Falls, OR 97601

GRANTOR'S NAME AND ADDRESS

GRANTEE'S NAME AND ADDRESS

After recording return to:

Thomas J. and Sharon R. Burns
2699 Lakeshore Drive
Klamath Falls, OR 97601

NAME, ADDRESS, ZIP

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

Thomas J. and Sharon R. Burns
2699 Lakeshore Drive
Klamath Falls, OR 97601

NAME, ADDRESS, ZIP

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF OREGON,

County of Klamath

I certify that the within instrument
was received for record on the 8th day
of Oct, 1992,
at 2:47 o'clock P.M., and recorded
in book/reel/volume No. M92 on
page 23657 or as fee/file/instru-
ment/microfilm/reception No. 52102,
Record of Mortgages of said County.

Witness my hand and seal of
County affixed.

Evelyn Biehn, County Clerk

NAME

TITLE

By Dorlene M. Mullen, Deputy

Fee \$10.00