08-26-93P03:38 RCVDK-43351 66918

## DEED OF RECONVEYANCE VOLM93 Page 21570

KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that
certain trust deed dated July 8
certain trust deed datedJuly8,
and Suzanne Hoperich, husband and wife as grantor and recorded on July 18 , 19 91,
in the Mortgage Records of
page14021, and/or as fee/file/instrument/microfile/reception No
ing real property situated in that county described as follows:
The stated in that county described as follows:

Lot 6 in Block 15, Fairview No. 2, in the City of Klamath Falls, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

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

having received from the beneficiary under the trust deed a written request to reconvey, reciting that the obligation secured by the 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 the described premises by virtue of the trust deed.

In construing this instrument and whenever its context 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, if any, affixed by an officer or other person duly authorized to do so by its Board of Directors.

DATED	August 25 9		AMATU COINTY TITLE COMPANY
		By	AMATH COUNTY TITLE COMPANY
			President
			Trustee
	STATE OF OREGO	N, County of Klam	<b>\_</b>
			e me on, 19,
4.1 N <u> </u>	byR F	it was acknowledged before	me on August 26 4 , 1993
			pany
			STATE OF OREGON,
Tı	uslee's Name and Address TO:		County ofKlamath ss.  I certify that the within instrument was received for record on the 26th day of
fter recordingt	***************************************	SPACE RESERVED	3:38 o'clock P.M., and recorded in book/reel/volume No M93 on page
Mfer recording return to (Name, Address, Zip): 		RECORDER'S USE	21570 and/or as fee/file/instru- ment/microfilm/reception No66918
Math Falls, OR 97603  Intil requested otherwise send all tax statements to (Name, Address, Zip):			Record of Mortgages of said County, Witness my hand and seal of
***************************************	I (rume, Address, 2		County affixed.  Evelyn Biehn, County Clerk  NAME  NAME  By Clerkene Medlender Deputy