67444

K-40894 09-02-93P03:41 RCが程を OF RECONVEYANCE Vol.m93 Page**22477** @

KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that
certain trust deed dated Ontal Ontal Control of the
in the Mortsage Records of Miles as grantor and recorded on October 7, 19 88
10 88
County Oredon in Wyytywy / MOO
nade 16927 and/or or to // /
1 " O " " The state of the stat
page16827, and/or as fee/file/instrument/microfilm/reception No
and property situated in that county described as follows:

Farm Unit D, or Lots 6 and 7 and the $N_2^1N_2^1N_2^1$ of Lot 8, and the $N_2^1N_2^1N_2^1$ of Lot 9 in Section 15, Township 41 South, Range 11 East of the Willamette Meridian.

Saving and excepting therefrom any portion thereof in any canals, roads or highways.

(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 September 1 ,1993	KLAMATH (COUNTY TITLE COMPANY
	By: 1) < (Deacu
		President
		Trustee
STATE OF OREGO This instrume	N, County of Klama	th) ss. ne on, 19,
by	***************************************	
1 nis instrume	nt was acknowledged before n	ne on September 1 ,1993 ,
as	resident	mpany
TRUDIE DUBANT STOTARY PUBLIC - OREGON Stote primitation Expires	\mathcal{L}	Motary Public for Oregon expires 1/30/93
		STATE OF OREGON, County of
Trustee's Name and Address TO;		I certify that the within instrument was received for record on the2nd day of
Affer recording return to (Name, Address, Zip);Gerald&CarolynHargroveHC::62Wilson.RdMerrill,OR97.633 Until requested otherwise send all tax statements to (Name, Address,	RECORDER'S USE	book/reel/volume No
	Foo \$10.00	Evelyn Biehn, County Clerk NAME TITLE By Daccle al March add L. Deputy