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77724	03-18-94410:	8 RCVDDEED OF	RECONVEYANCE				
in the Mortgag page 16861 ing real prope	ALL MEN BY THE SECONDARY SECONDARY SECONDARY SECONDARY SECONDARY SECONDARY SECONDARY SITUATED 495, BLOCK 105 THE OFFICE OF	LAMATH Gle/instrument/mic county described as	as grantor and i County, Oregon rofilm/reception I follows:	recorded on	ILY 30 colume No (indicate	M92 which), conve	2, at

(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 FEBLUARY 9 1994

	***************************************	Trustee		
STATE OF OREGON, County of	Klamath wiedsed before me on	Fibruary	5	, 19. 54,
This instrument was acknobyThis instrument was ackno	P. BrandsnESS			, 19,
by		,,,,,,		
OCIAL SEAL ARA L. MASTERS PUBLIC - OREGON	/ Yushin a	Lho	12	
SSION NO. 021893 N EXPRES FEB. 05, 1997	My commission expire	c	y Public 7	for Oregon

WILLIAM P. BRANDSNESS

BARBARA L. MASTERS NOTARY PUBLIC - OREGON COM:AISSION NO. 021893 MY COM:AISSION EXPRES FEB. 03, 1997	Notary Public for Oregon My commission expires 3-5-57
WILLIAM P. BRANDSNESS Trustee's Name and Address TO: KLAMATH DENTAL OFFICE, INC., AN OREGON CORPORATION	STATE OF OREGON, County ofKlamath
After recording return to (Name, Address, Zip): SOUTH_VALLEY_STATE_BANK PO_BOX_5210 KLAMATH_FALLS_OR97601 Until requested otherwise send all tax statements to (Name, Address, Zip):	ment/microfilm/reception No.7.17.24, Record of Mortgages of said County. Witness my hand and seal of County affixed. Evelyn Bichn. County Clerk NAME By Pulling Mullingial, Deputy