04-13-95P03:43 RCVD

Val MOS Page 9328

DEED OF RECONVEYANCE

WTC 1300 7450 KNOW ALL MEN BY THESE PRESENTS, That the undersigned trustee or successor trustee under that certain trust deed frank S. Jakubowski and June 7 19 85, executed and delivered by Frank S. Jakubowski and dated June 13 19 85 in Feggy R. Jakubowski as grantor and recorded on June 13 19 85 in Feggy R. Jakubowski as grantor and recorded on M85 19 85 in Feggy R. Jakubowski as grantor and recorded on M85 19 85 in Feggy R. Jakubowski M85 19 85 in Feggy R.	d · in
the Mortgage records of Klamath County, Oregon, in book/reel/volume No. M85 the Mortgage records of Klamath County, Oregon, in book/reel/volume No. (indicate which page	1),

The North 115 feet of the East one-half of Lot 2, Block 1, HOME ACRES, Klamath County, Oregon. EXCEPTING THEREFROM that portion conveyed to Klamath County, by instrument recorded in Volume M78 at Page 4934, records of 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 masculine gender includes the feminine and neuter and 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 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 Direct	tors.	CHICAGO TITLE INSURANCE COL	MPANY OF OREGON
DATED:April 5	., 19.95	BY CHICAGO TITLE INSURANCE CO	***************************************
THIS INSTRUMENT WILL NOT ALLOW USE OF THE P IN THIS INSTRUMENT IN VIOLATION OF APPLICA AND REGULATIONS. BEFORE SIGNING OR ACCI AND THE PERSON ACQUIRING FEE TITLE TO TH MENT, THE PERSON ACQUIRING FEE TITLE TO TH CHECK WITH THE APPROPRIATE CITY OR COUNT MENT TO VERIFY APPROVED USES.	PROPERTY DESCRIBED BILE LAND USE LAWS PTING THIS INSTRU- E PROPERTY SHOULD Y PLANNING DEPART-	Casey Wenger, Asst. V	ice-President
(If the trustee who signs above is a corporation, use the form of acknowledgement opposite.)	(ORS 93.490)		1 00
	STATI	E OF OREGON, County ofClack	camas
STATE OF OREGON,	, '	10 45	
	, n	Casey Wenger	Ç , , , , ,
County of			Who, being day and
, 19		for himself and not one for the other, did	I say that the former is the
	eacn	for himself and not one for the other, dic	at and that the latter is the
Personally appeared the above named		Acct Vice presider	nt and that the latter 12 the
rersonany appeared the above humbur.		secretary of	
	COT CR CO	THE THEIRANCE COMPANY. OF.	OREGON., a corporation,
	ing ington. and t	hat the seal affixed to the foregoing instru	ument is the corporate seal
and acknowledged the fore	of sai	d corporation and that said hist attended	directors; and each of them
mentio De Oppicial SEAL TEAL	erand deed. of sai	d corporation and that said instrument was id corporation by authority of its board of owledged said instrument to be its volur	ntary act and deed.
(A 8888 ENID GRIFFIII	U) Pot	fore kie:	1 (OFFICIAL
	/n	Y-Y-X	
FORMULE OF THE PUBLIC OREGON	(4)	Chillie .	(OFFICIAL SEAL)
OFFICIAL COMMISSION NO. 012413		and Plyfic	SEAL)
OFFICIAL COMMISSION NO. 012413	S Nota	ry Qublic for Oregon	SEAL)
OFFICIAL COMMISSION NO.012413. SEAL MY COMMISSION EXPIRES JAN. 15, 1991	Nota	and Plyfic	
OFFICIAL COMMISSION NO. 012413	Nota	ry Public for Oregon commission expires:	(If executed by a corporation, affix corporate seal)
OFFICIAL COMMISSION NO.012413. SEAL MY COMMISSION EXPIRES JAN. 15, 1991	Nota	ry Public for Oregon commission expires:	(if executed by a corporation, affix corporate seal)
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COMMISSION NO.012413 SEAL MY COMMISSION EXPIRES JAN. 15, 199 My commission expires My commission expires GRANTOR'S NAME AND ADDRE After recording roturn to: Washington Mutual Savings E P. O. Box. 91006. SASO307	Nota My o	STATE OF OREC County of . K. ! certify that is received for recoin. Apr.i. at3:43. o'cloc in book/reel/ropage .9328. SPACE RESERVED FOR RECORDER'S USE RECORDER'S USE	SEAL) (If executed by a corporation, affix corporate seal) GON, 1 amath ss. the within instrument was cord on the 13th day 1
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GRANTEE'S NAME AND ADDRES After recording return to: Washington Mutual Savings E P. O. Box. 91006. SASO307. Seattle, WA. 98111. NAME, ADDRESS, ZIP	Nota My o	STATE OF ORECCOUNTY of . K. I certify that is received for recoin. April at . 3:43 . o'clos in book/reei/ro page . 9328	SEAL) (If executed by a corporation, affix corporate seal) GON, 1 amath the within instrument was cord on the13thday 1

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