K-47921 DEED OF RECONVEYANCE

BIEVERS-NESS L	AW PUBLISHING C	O., FORTLAND, OR BIZON	
01.M95	_Page_	25917	Ì

KNOW ALL MEN BY THESE PRESENTS,	That the undersigned trustee or	r successor trustee u	nder that
certain trust deed dated APTIL 20 19	95 executed and delivered by		
Star & Associates Inc.	as grantor and recorded on	April 21,	1995
in the Mortgage Records of Klamath	. County, Oregon, in book/Yeel/	volume NoM95	at
page10155, and/or as fee/file/instrument/micro	ofilm/reception No	(indicate which)	, convey-
ing real property situated in that county described as t	follows:	•	

 $S_2^1SW_2^1$ of Government Lot 1 of Section 18, Township 35 South, Range 13 East of the Willamette Meridian, 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.

DATEDSeptember25.,, 1995.	KLAMATH,	COUNTY TITLE COMPANY	***************************************
		Kridy Wyn	+
	Вуд.	MICCO XMIII	\mathcal{U}
		Secretary	
	***************************************	Trustee	•••••••••••
STATE OF OREGON, Count	y ofKlamath) ss.	
		ne on	
by	************************		
		ne onSeptember 25.	
byTrudie Dur			
asSecretary.		any	
OFFICIAL SEAL SUE NOVEMBER NOTARY PUBLIC - OREGON COMMISSION NO. 044490 MY COMMISSION EXPIRES JUNE 08, 1999	My commission	Notary Punce St. 196	blic for Oregon
		STATE OF OREGON,	}
		County ofKlama	thsss.
Trustee's Name and Address		I certify that the wit	
10:		was received for record or	
•••••••••••••••••••••••••••••••••••••••		ofSept	
***************************************	SPACE RESERVED	.3:47 o'clockPM., a	
	FOR . RECORDER'S USE	book/reel/volume No 25917 and/or as f	
After recording return te (Name, Address, Zip): Star & Associates Inc		ment/microfilm/reception	
325 Main St. Suite 205		Record of Mortgages of sa	•
Klamath Falls, OR 97601		Witness my hand	•
Until requested otherwise send all tax statements to (Name, Address, Zip):		County affixed.	
		Bernetha G. Letsch	, Co Clerk
		NAME TO A S	TITLE
***************************************	FEE:\$10.00	Bundle July	Deputy