FORM No. 822-ASSIGNMENT OF TRUST DEED BY BENEFICIARY-O	regen Trust Deed Series. Cor		
NE. MC.	13010-995	TRIGHT 1990 STRVENS-NESS LAW	20259
ASSIGNMENT OF TRUST DE	ED BY BENEFICIARY OR BENEFIC	IARY'S SUCCESSOR IN INTEREST	_Page
FOR VALUE RECEIVED, the unde	rsigned who is the benel	iciary or beneficiary's su	ccessor in interest under
ARRITOLA PARRATIES	, 19. J.Z, executed	and delivered by	
OR PARKET 15 , 1925 , in book			, grantor
PAMES D. MARSHEN AND MORY A PROPERTY TOWN	/ To		range, in which
on PhARCH 15 , 1995 , in book ment/microfilm/reception No.	reel/volume No. M 99	on page /2332	he beneficiary, recorded
			Klamath
County, Oregon, and conveying real property A pure, of land situated in Government L of the Willamete Meridian, Klamath Coul	m said County described	As follows:	<b>V</b> = - ( <b>I</b>
Beginning at a 5/8" iron rod on the South Northern Railroad from which the Section	vesterly right of way boundary	of the Great	
to a 5/8" iron rod on the high left bank of	thence South 89 degrees 22' 5.	West 731.17 feet	
bearing 50 feet, more or less, to the water the left bank of Loss River to a point from	edge of Lost River: thence	upstream along	
Lost River bears North 53 degrees 49' East	t 60 feet, more or less; thence	high left bank of North 53 degrees	
661.81 feet to a 5/8" iron rod on the South	iron rod; thence North 53 de	grees 49' East . Y of the Great	
Beginning at a 5/8" iron rod on the South Northern Railroad from which the Section South 40 degrees 30' West 1685,35 feet; to a 5/8" iron rod on the high left bank of bearing 60 feet, more or less, to the water the left bank of Lost River to a point from Lost River bears North 53 degrees 49' East 60 feet, more or less, to said 5/8" 661.81 feet to a 5/8" iron rod on the South Northern Railroad: thence South 28 degree Southwesterly right of way boundary of the beginning.	es 43" 04" East 551.45 feet ale Great Northern Railroad, to	ong the the place of	
ALSO EXCEPTING THEREFROM that p America by Deed recorded in Book 93 at p	ortion of property conveyed to	United States of	
	CATHEDINA S. GALLA	SHER AND BAMES D.	mua na Ad
hereby grants, assigns, transfers and sets over to	EACH WITH	A WALE / 1/1 "-	
hereinafter calla	I necidana I		
assigns, all of the beneficial interest in and untherein described or referred to, with the inter-	nder said trust deed, to	sether with the notes of	tatives, successors and
therein described or referred to, with the inter- under said trust deed.	est thereon, and all right	s and benefits whatsoeve	er accrued or to accrue
The undersigned hereby covenants to an iciary's successor in interest under said trust of	nd with said assignee the	at the undersigned is the	e beneficiary or ben .
has the right to sell, transfer and assign the sel	me and the owner ar	d holder of the benefici	al interest therein and
		t less than \$ 6.2 has	eby, and that there is
In construing this instrument and whenev	er the context hereof so	requires the singular inc	ludes the plural.
ation, it has caused its name to be signed and i rder of its board of directors.	is seal allixed by an offic	er or other person duly a	authorized to do so by
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ATED: 3 - 1/ - 10 99	atheri	\$ \\ \I_\(\)!	and es
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STATE OF OREGON	C (		
STATE OF OREGON, This instrument	Use acknowledged to t	) ss.	
by	vas acknowledged before	me on	, 19,
- institution p	vas acknowledded being	me on	
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as			***************************************
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·	Dec.	alladie	1
AMERITAE, has recorded this			
The second of th	My commission	Nota.	ry Public for Oregon
	The second second	n expires	
THE PART OF SCI LICON TO BE TO SELECT THE PARTY OF THE PA			
ABBIGNMENT OF TRUST DEED		STATE OF OREGO	ON.
BY BENEFICIARY		County of	\rightarrow \rightarrow \text{ss.}
		Regretify that th	e within instrument
		was received for reco	ord on theday
Assignor		of	19
to	(DON'T USE THIS	at	M., and recorded
	SPACE; RESERVED	in book/reel/volume	Noon
1	FOR RECORDING	page o	r as fee/file/instru-

amnititle - 47185

ABEL IN COUNTIES WHERE USED.1

NAME TITLE

## CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

county of San Mate	ss.
On 5/17/99, before me, personally appeared Cather	Nurve Serefiddin, Notay Pu Narje and Title of Othicer (e.g., Jane Doe, Notary Public) Ine S. Gallagher Name(s) of Signer(s)
	personally known to me proved to me on the basis of satisfactory evidence
NURIYE SEREFIDDIN Commission # 1189012 Notary Public - Colfornia Son Mateo County My Comm. Expires Jul 4, 2002	to be the person(s) whose name(s) is/afe subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
Place Notary Seal Above	WITNESS my hand and official seal.  Muse Surfature of Notary Public
Though the information below is not required by to	PTIONAL ————————————————————————————————————
and proving historia hadderia fallicital a	and reattachment of this form to another document.
Description of Attached Document Title or Type of Document:	
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Document Date:	Number of Pages:
Document Date: Signer(s) Other Than Named Above: Capacity(les) Claimed by Signer	
Document Date: Signer(s) Other Than Named Above:  Capacity(les) Claimed by Signer Signer's Name:  Individual	RIGHT THUMBPRINT OF SIGNER
Document Date:  Signer(s) Other Than Named Above:  Capacity(les) Claimed by Signer  Signer's Name:  Individual  Corporate Officer — Title(s):	RIGHT THUMBPRINT OF SIGNER
Document Date:  Signer(s) Other Than Named Above:  Capacity(les) Claimed by Signer  Signer's Name:  ☐ Individual  ☐ Corporate Officer — Title(s):  ☐ Partner — ☐ Limited ☐ General	RIGHT THUMBPRINT OF SIGNER
Document Date:  Signer(s) Other Than Named Above:  Capacity(les) Claimed by Signer  Signer's Name:  ☐ Individual  ☐ Corporate Officer — Title(s):  ☐ Partner — ☐ Limited ☐ General  ☐ Attorney in Fact	RIGHT THUMBPRINT OF SIGNER
Document Date:  Signer(s) Other Than Named Above:  Capacity(les) Claimed by Signer  Signer's Name:  Individual  Corporate Officer — Title(s):  Partner — Limited General  Attorney in Fact  Trustee	RIGHT THUMBPRINT OF SIGNER Top of thumb here
Document Date:  Signer(s) Other Than Named Above:  Capacity(les) Claimed by Signer  Signer's Name:  ☐ Individual  ☐ Corporate Officer — Title(s):  ☐ Partner — ☐ Limited ☐ General  ☐ Attorney in Fact	RIGHT THUMBPRINT OF SIGNER. Top of thumb here  State of Oregon, County of Klamath
Signer(s) Other Than Named Above:  Capacity(les) Claimed by Signer Signer's Name:  Individual Corporate Officer — Title(s): Partner — Limited General Attorney in Fact Trustee Guardian or Conservator Other:  Signer Is Representing:	RIGHT THUMBPRINT OF SIGNER Top of thumb here