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Recording Requested By:
HomEq Servicing Corporation

And When Recorded Mail To:
HomEq Servicing Corporation
P O BOX 13309
Mailcode #CA3501
Sacramento, CA 95813-3309

Loan #: 0103406567 Customer #: 740 RLS #: 938611

State of Oregon Recorded 12/08	1/04 8.47	Klama <i>O</i> e	th _m
Vol M04 Pg 8	4051		
Linda Smith, County Clerk Fee \$ 2/° 2 # of Pgs /			
Fee \$ 2/02	# of Pas	1	

DEED OF RECONVEYANCE

THE UNDERSIGNED, as trustee under that certain deed of trust described below, conveying real property situated in said county and more fully described in said Deed Of Trust, having received from the beneficiary under said deed of trust a written request to reconvey, reciting that the obligation secured by said deed of trust 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 deed of trust.

Original Borrower: JAMES M. ALIG. Original Beneficiary: TMS MORTGAGE INC., DBA THE MONEY STORE. Current Beneficiary: HOMEQ SERVICING CORPORATION (SUCCESSOR BY MERGER TO TMS MORTGAGE INC., DBA THE MONEY STORE). Deed of Trust Dated: SEPTEMBER 10, 1998 Recorded on: SEPTEMBER 16, 1998 as Instrument No. 66378 in Book No. M98 at Page No. 34078 Property Address: 3219 NAOMA ST KLAMATH FALLS OR 97603- County of KLAMATH, State of OREGON. 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 hereunto by its officer duly authorized thereunto by order of its Board of Directors. Dated: November 23,2004

ARUSI R. LOPRINZI, OSBA #03381

By:

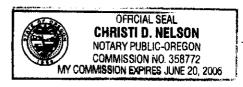
Arusi R. Loprinzi, OSBA #03381

State of Oregon }
County of Multroman } ss.

on Nov 23,000, before me, Christine Nelson, personally appeared Arusi R. Loprinzi, OSBA #03381 personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are 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.

Witness my hand and official seal.

Christi Wilson
(Notary Name):



PREPARED BY: HomEq Servicing Corporation P O BOX 13309 Mailcode #CA3501 Sacramento, CA 95813-3309 Kathy L. Munoz