

RECORDING REQUESTED BY

Gene A. and Judith E. Pulis

AND WHEN RECORDED, MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:

Name: Joseph W. and Kathleen J. Longbrake

Street Address: 3015 Lake Forest Rd

City, State & Zip code: Chiloquin, OR 97624

TITLE ORDER NO. 0091173 ESCROW NO. MT91173-MS

2012-006148

Klamath County, Oregon



00119319201200061480010011

06/06/2012 09:28:40 AM

Fee: \$37.00

SPACE ABOVE THIS LINE FOR RECORDER'S USE

## DEED OF FULL RECONVEYANCE

Whereas, AmeriTitle, the Trustee x under the Deed of Trust dated August 31, 2011, made and executed by Joseph W. and Kathleen J. Longbrake as Trustor(s) to Gene A. and Judith E. Pulis as beneficiary and recorded as Instrument No. 2011-10094, on 9/6/2011, in Book 2011 at Page 10094 of the Office Records in the Office of the Recorder of Klamath County, State of Oregon having received from Beneficiary x under said Deed of Trust a written request to reconvey, reciting that all sums secured by said Deed of Trust have been fully paid, and said Deed of Trust and the note or notes secured thereby having been surrendered to the Trustee x for cancellation, do x hereby reconvey, without warranty, to the person or persons legally entitled thereto, all right, title and interest heretofore acquired and now held by said Trustee under said Deed of Trust, in the real property commonly know as Oregon Shores 2 Block 48, Lot 21 situated in the County of Klamath, State of Oregon, and more particularly described as follows:  
Lot 21, Block 48, Tract 1184, Oregon Shores Unit 2, First addition, according to the official plat thereof on file in the office of the County Clerk, Klamath County, Oregon

Date

June 5, 2012

Gene A. Pulis  
Judith E. Pulis  
as Trustee

STATE OF Oregon  
COUNTY OF Klamath

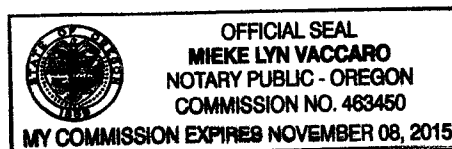
On June 5, 2012 before me, Mieke Lyn Vaccaro, a Notary Public, personally appeared Gene A. and Judith E. Pulis who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same 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. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

Witness my hand and official seal.

Signature

Mieke Lyn Vaccaro

(SEAL)



RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)

- ☐ INDIVIDUAL(S)  
☐ CORPORATE  
OFFICER(S) \_\_\_\_\_  
☐ PARTNER(S) ☐ LIMITED (TITLES)  
☐ GENERAL  
☐ ATTORNEY IN FACT  
☒ TRUSTEE(S)  
☐ GUARDIAN/CONSERVATOR  
☐ OTHER: \_\_\_\_\_

SIGNER IS REPRESENTING:

Name of Person(s) or Entity(ies)