

KNOW ALL MEN BY THESE PRESENTS: That WESTERN BANK, formerly BANK OF KLAMATH COUNTRY

_____, does hereby certify and declare that that certain _____
mortgage, bearing date the 12th day of May, 19 72, made and executed by
R. J. CARVALHO and HAZEL E. CARVALHO, husband and wife,

to BANK OF KLAMATH COUNTRY securing the payment of the sum of
Two Thousand and no/100ths----- (\$ 2,000.00) DOLLARS,
and recorded on the 15th day of May, 19 72, in Book M 72 at page 5140
of Records of _____ Mortgages in and for the County of Klamath, State of
Oregon, together with the debt secured thereby, has been fully paid, satisfied and discharged, and the
County Clerk or Recorder of said County is hereby authorized and requested to cancel the same of record.

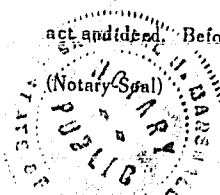
IN WITNESS WHEREOF, WESTERN BANK, Klamath Falls Branch, has caused these
presents to be executed on its behalf by its duly authorized representative this 7th day of
February, 19 73

Joseph W. Lance
By _____
Vice President and Manager

STATE OF OREGON, _____)
COUNTY OF Klamath _____) SS _____
February 7 A. D. 19 73

Personally appeared Joseph W. Lance
who, being duly sworn did say that he is the Vice President and Manager
of Western Bank, Klamath Falls Branch, and that the said instrument was signed in behalf
of said corporation by authority of its Board of Directors; and he acknowledged said instrument to be its voluntary

act and deed. Before me:



Caroline H. Marshall
Notary Public for Oregon
My Commission Expires February 9, 1974

SATISFACTION OF MORTGAGE
WESTERN BANK, KLAMATH FALLS BRANCH
TO
R. J. CARVALHO AND HAZEL E. CARVALHO

WHEN RECORDED, MAIL TO:
WESTERN BANK
P. O. Box 1149
Klamath Falls, Ore. 97601

STATE OF OREGON, _____
County of Klamath _____
Filed for record at request of
Western Bank
on this 8th day of February A. D. 1973
at 12:26 o'clock PM, and
recorded in Vol. M73 of Mortgages
Page 1444
Wm D. MILNE, County Clerk.
By Caroline H. Marshall Deputy
Fee \$2.00

FEB 8 12 25 PM 1973

| | |
|---------------------------------|-------------------------------|
| 22. MAILING ADDRESS | 23. PHYSICIAN |
| 24. FUNERAL DIRECTOR-SIGNATURE | 25. MAUS (Specify) |
| 26. REGISTERED FOR REGISTRATION | 27. RECEIVED FOR REGISTRATION |

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