6 4-4-			12273		iy U
State	Accident		e Fund		
	26940	يريغ. رئيس المرجع المحري الأربي			
			Cla	imant,	۲. را ا
	V	a			
WT AT					
- KLAI	MATH GAS C	UMPANY			

Defendant

m 4654 Page Vol. SATTSFACTTON OF LITEN Filed Pursuant to ORS 656. 566

145971-75 (4

KNOW ALL MEN BY THESE PRESENTS, that the State Accident Insurance Fund of Salem, Oregon, for and in consideration of the sum of \$ 239.15 hereby acknowledges full satisfaction of a certain lien filed against the above-named defendant and in favor of the State Accident Insurance Fund, which said lien is duly recorded in Klamath County, State of Oregon, in Record of Mechanics Lien, Reel No. 99896 Instrument No. , Volume M75 Page 4203 18th on the April , 19 75 , and the County Clerk of said day of County is hereby authorized and directed to satisfy said lien of record.

(Fund) (Seal)

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HAR

11.

STATE ACCIDENT ANSURANCE FUND

STATE OF OREGON) SS. County of Marion)

I, B. Rastorfer , being first duly sworn, depose and say that I am Credit Manager for the State Accident Insurance Fund of the State of Oregon, and that by order of the State Accident Insurance Fund, I have the authority to execute this instrument and that I executed the foregoing Satisfaction of Lien and affixed the seal of the State Accident Insurance Fund for and on behalf of said Fund.

February

BENELS

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Notary Seal

567-1-77

1.25

at-14-17-6 10.50

1.7---

Notary Public for Oregon My Commission Expires SEP 9 1978

Subscribed and sworn to before me

day of

18th

this

STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 21st day of MARCH _A.D., 19 77 at 1;00 o'clock P.M., and duly recorded in Vol M77 of_ MECHANIC'S LIENS 4654 on Page FEE_\$ 3.00

WM. D. MILNE, County Clerk __ Deputy