30071

STATE ACCIDENT INSURANCE FUNI) CORPORATION

Claimant,

vs

SATISFACTION OF LIEN

Vol. M83 Page

Filed Pursuant to ORS 656. 566

Stochsler & Stochsler, Inc

Defendant

KNOW ALL MEN BY THESE PRESENTS, that State Accident Insurance Fund Corporation of Oregon, for and in consideration of the sum of \$ 196.41 , hereby acknowledges full satisfaction of a certain lien filed against the above-named defendant and in favor of State Accident Insurance Fund Corporation, which said lien is duly recorded in Klamath County, State of Oregon, in Record of <u>Vechanics</u> Lien, Reel No. Instrument No. _____25906 ____, Volume _____M83 ___, Page ____11483 ____, on the _____19th day of _____, 19 83, and the County Clerk of said County is hereby authorized and directed to satisfy said lien of record.

STATE ACCIDENT INSURANCE FUND CORPORATION

IN. U

21103 2 STATE OF OREGON County of Marion)

SS.

Stuehsler & Stuchsler, Inc

PO. Bot 64 Bunanze, O.R 97123

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

Subscribed and sworn to before me this 29th day of Sentember, 1983

Jichard:

Notary Public for Oregon

My Commission Expires AUG 2 1 1987

STATE OF OREGON: COUNTY OF KLAMATH: I hereby certify that the within instrument was received and filed for SS o'clockp_M, record on the <u>31st day of October</u> A.D., 1983 at 3:19 , of <u>Mechanics Lienen page 18779</u> and duly recorded in Vol M83

EVELYN BIEHN, COUNTY CLERK (). deputy by 🗍