400 High Street SE,	RANCE FUND CORPORATION ) Salem, OR 97312	Policy 436507-106	
	Claimant,	SATISFACTION OF LIEN	
	vs.	Filed Pursuant	
Lon & Bonnie Ma Community Care Home	oon, dba )	to ORS 656.566	
	Defendant.		
\$106.64, hereby ackrefiled against the ab Accident Insurance Frecorded in Klamath Instrument No. 87652 1988, and the County directed to satisfy  (Corp') (Seal)  STATE OF COREGON County of Marion ODDAY  I, H. N. Wineland am Credit Manager for the State of Oregon, Fund Corporation, I hand that I executed to the State of the State	THESE PRESENTS, that Stat Oregon for and in conside lowledges full satisfaction ove-named defendant and in und Corporation, which sa County, State of Oregon, Volume M88, Page 8220, Clerk of said County is I said lien of record.  STATE ACCIDENT INSURAN By  State Accident Insurance and that by order of State ave the authority to execute foregoing Satisfaction ident Insurance and Insurance Insura	depose and say that I Fund Corporation of e Accident Insurance ute this instrument	
	1/11.	$\rho \setminus \rho \cap \rho$	
	Subscribed and sworn to day of Quine, 19	hefone me Ald	
( Notary ) ( Seal )	Notary Public for Orego		
6 93h/9249B/88/06/10	My Commission Expires	<u>042£90</u>	
	Return to:	S.A.I.F. Corp.	
STATE OF OREGON: COUNTY OF KI			
Filed for record at request of	Lon Mabon		
of A.D., 19 & of Coun	8 at 3:22 o'clock P. ty Lien Docket on l	theth	day ,
FEE \$5.00	Evelyn B	iehn County Clerk	