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STATE ACCIDENT INSURANCE FUND CORPORATION | Policy 461064 | 400 HIGH ST SE | SALEM, OR 97312 | Claimant, | SATISFACTION OF LIEN | Filed Pursuant | to ORS 656.566 | Klamath Falls Brick & Tile Company | Employer. |)

KNOW ALL MEN BY THESE PRESENTS, that State Accident Insurance Fund Corporation for and in consideration of the sum of \$1,779.40, 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 Lien, Instrument No. 2123, Volume M89, Page 11821-22, on the 30th day of June, 1989, and the County Clerk of said County is hereby authorized and directed to satisfy said lien of record.

(Corp.) STATE ACCIDENT INSURANCE FUND CORPORATION

(Seal)

STATE OF OREGON SS
County of Marion

STATE ACCIDENT INSURANCE FUND CORPORATION

CREDIT MANAGER

I, H.N. Wineland, being first duly sworn on oath depose and say that I am Gredit 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 27 day of 4176, 19 70

Notary Public for Oregon

My Commission Expires 3

j1c/4700R/90/06/26

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STATE OF OREGON, County of Klamath

Filed for record at request of:

Fee, \$5.00

Return: Klamath Falls Brick & Tile Co. P.O. Box 242 Klamath Falls, Or. 97601