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ASPEN 35049 STATE ACCIDENT INSURANCE FUND CORPORATION) Policy 408713 400 HIGH ST SE SALEM, OR 97312 Claimant,) SATISFACTION OF LIEN VS.) Filed Pursuant

) filed Pursuant) to ORS 656.566

John S. Nolan, Patrick J.Oliver, Jay M. Oliver, dba Round Lakes Mobile Home Park & Golf Course

Employer.

KNOW ALL MEN BY THESE PRESENTS, that State Accident Insurance Fund Corporation for and in consideration of the sum of \$384.24, 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. 36143, Volume M-84, Page 7183, on the 1st day of May, 1984, and the County Clerk of said County is hereby authorized and directed to satisfy said lien of record.

By

(Corp) (Seal)

26211

STATE ACCIDENT INSURANCE FUND CORPORATION

STATE OF OREGON SS County of Marion

I, H.N. Wineland, being first duly sworn on oath depose and say that I am Credit 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.



dln/0341V/91/02/20

Subscr bed and sworn to before me

of/

Notary Public for Oregon

My Commission Expires

STATE OF OREGON, County of Klamath

Filed for record at request of:

<u> </u>				
on this <u>22nd</u>	day of _	Feb.	A.D. 19	91
at <u>3:46</u>	o'clock	Р M.	and duly	recorded
in Vol	$-$ of \underline{Co}	. Lien	Page	3312
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By <u>S</u>	anti	u M	ulend	lare
Fee, \$5.00				Deputy.

Return: ATC

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