## 09-27-95A10:15 RCVD-

FORM No. 959-JATISFACTION OF LIEN.

ESS LAW PUB. CO., PORTLAND.

KNOW ALL MEN BY THESE PRESENTS, That the undersigned hereby certifies and declares that that certain lien dated <u>May 11</u>, 19.95, in which <u>OREGON SHORES RECREATIONAL CLUB, INC.</u> is the claimant, recorded on <u>May 15</u>, 19.95, in book/reel/ volume No. <u>M95</u> at page 12516, or as tee/tile/instrument/microtilm/reception No. 99996 (indicate which) of the Co. Lien Docket Records of <u>KLAMATH</u> County, Oregon.

D. M. & SUE M. CHUCKOVICH (LOT 09, BLOCK 48 Oregon ShoresSubdivision - Unit 2, Tract 1184)

has been, together with the account or debt thereby secured, fully paid and satisfied and hereby is discharged. In construing this instrument and whenever the context so requires, the singular includes the plural. IN WITNESS WHEREOF, the undersigned has caused these presents to be duly executed; if the undersigned is a corporation, it has caused its name to be signed and seal affixed by its officers, duly authorized thereto by order of its board of directors.

DATED: September 22, 19.5	95 OREGON SHORES RECREATIONAL CLUB, INC.	
(If executed by a corporation, affix corporate seal.)	Bendyn S Johnster	
(If the trustee who signs above is a corporation, use the form of acknowledgment apposite.)	Rosalyn.SJohnston (Office Manager)	ļ
STATE OF OREGON, County of KLAMATH This instrument was acknowledged before me o September 22, 19.25, by	STATE OF OREGON, }es.   County ofKLAMATH }es.   This instrument was acknowledged before me on September 22   19_95, byROSALYN_SJOHNSTON asOffice Manager   ofOREGON_SHORES_RECREATIONAL_CLUB, INC. INC.	
(SEAL) Notery Public for Orego My commission expires:	m Notary Public for Oregon My commission expires: / 0 - 2.0-96 My commission expires: / 0 - 2.0-96 My commission expires: / 0 - 2.0-96	50N 023
SATISFACTION OF LIEN	STATE OF OREGON, County of Klamath	
OREGON SHORES RECREATIONAL CLUB, INC. Lien Claimant vs. D. M. & SUE M. CHUCKOVICH AFTER PIECORDING RETURN TO D. M. & SUE M. CHUCKOVICH P. O. BOX 927 KIMEI, HI 96753-0927	I certify that the within instru- ment was received for record on the .27th. day of September	
Fee	s: \$5.00 By Connette Muelle Deauter	