

1999 NOV 30 AM 11:33

MTC 13916-1448

SATISFACTION OF MORTGAGE

KNOW ALL MEN BY THESE PRESENTS, That

KLAMATH ORTHOPEDIC CLINIC, P.C., EMPLOYEES MONEY PURCHASE PENSION TRUST 1-1000195-6 B.F.B.
owner and holder of the Mortgage and the obligation hereinafter described, do
hereby certify and declare that a certain mortgage, bearing date the 24th day
of February, 1982, made and executed by

BENJAMIN F. BALME & LENOR BALME, husband and wife, the mortgagor therein to,
KLAMATH ORTHOPEDIC CLINIC, P.C., EMPLOYEES MONEY PURCHASE PENSION TRUST 1-1000195-6 B.F.B.
in the office of the Klamath County Clerk, State of Oregon, in Volume M83,
Page 3260, Microfilm Records of Klamath County, Oregon, on March 3, 1983.

together with the debt thereby secured, is fully paid, satisfied, and discharged.

In construing this satisfaction of mortgage, where the context so
required, singular includes the plural and all grammatical changes shall be
implied to make the provisions hereof apply equally to corporation and to
individuals.

IN WITNESS WHEREOF, the undersigned has executed this instrument this
29th day of November, 1999; if the undersigned is a corporation it has
caused its name to be signed.

KLAMATH ORTHOPEDIC CLINIC, P.C., EMPLOYEES MONEY PURCHASE PENSION TRUST 1-1000195-6 BFB

[Signature]

Trustee

STATE OF OREGON, County of Klamath ss.

This instrument was acknowledged before me on _____, 19

by

This instrument was acknowledged before me on 11/29, 1999

by

Benjamin F. Balme, M.D.

as

Trustee

of

Klamath Orthopedic Clinic, P.C. Employees Money Purchase Pension Trust 1-1000195-6 B.F.B.

[Signature]
Notary Public of OREGON
My commission expires 11/16/2003

Mortgagee: _____

STATE OF OREGON,

County of _____ ss

I certify that the within instrument
was received for record on the _____ day
of _____, 19____, at _____
o'clock _____ M., and recorded in
Volume No. _____ on page _____ or as
/instrument/ No. _____
Record of Mortgages of said
County.

Mortgagor: _____

Witness by my hand and seal of County affixed

AFTER RECORDING RETURN TO:

Benjamin E. Balme et ux
1620 Cove Point Rd.
Klamath Falls, OR 97601

NAME _____ TITLE _____
By _____ Deputy

State of Oregon, County of Klamath
Recorded 11/30/99, at 11:33 a.m.
In Vol. M99 Page 47210
Linda Smith,
County Clerk Fee \$ 10.00