

MTC81440

2008-001316
Klamath County, Oregon



01/31/2008 01:57:26 PM

Fee: \$21.00

SATISFACTION OF MORTGAGE

KNOW ALL MEN BY THESE PRESENTS, That ATRF, INC owner and
holder of the Mortgage and the obligation hereinafter described, do hereby certify and declare that a certain mortgage,
bearing date the 14 day of OCTOBER, 2006, made and executed by
JOEL FUNKHOUSER AND SHEILA FUNKHOUSER, the mortgagor
therein to, ATRF, INC, the mortgagee therein, and recorded in the office
of the KLAMATH County Clerk, State of Oregon, in Volume 2006, Page 022676, Microfilm Records of
KLAMATH County, Oregon, on NOVEMBER 14, 2006.

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.

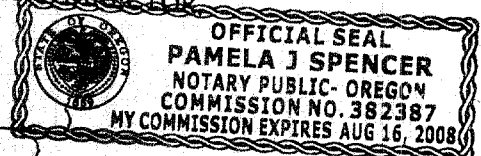
IN WITNESS WHEREOF, the undersigned has executed this instrument this 29th day of JAN,
2008; if the undersigned is a corporation it has caused its name to be signed.

Bill Sizemore
Signature

Bill Sizemore
BILL SIZEMORE, EXECUTIVE DIRECTOR
ATRF, INC

STATE OF _____
County of _____

STATE OF Oregon
County of Klamath



This instrument was acknowledged before me on
by _____ and

This instrument was acknowledged before me on
(ap) January 29 2008
by Bill Sizemore individually and
as EXECUTIVE DIRECTOR
of ATRF, INC

Notary Public for _____

Notary Public for OREGON

(SEAL)
My commission expires: _____

Pamela J Spencer
(SEAL)
My commission expires: 8/16/2008

SATISFACTION OF MORTGAGE
RE: Mortgage from

JOEL FUNKHOUSER AND SHEILA FUNKHOUSER
Mortgagor(s)

to

ATRF, INC
Mortgagee(s)

STATE OF OREGON,
County of _____

I certify that the within
was received for record on the _____ day
of _____, at _____
o'clock _____ M, and recorded in book/reel/
volume No. _____ on page _____ or as
fee/file/instrument/microfilm/reception
No. _____, Record of Mortgages of said
County.
Witness by my hand and seal of County affixed

NAME _____ TITLE _____
By _____ Deputy

AFTER RECORDING RETURN TO:
AMERITITLE

AMT