

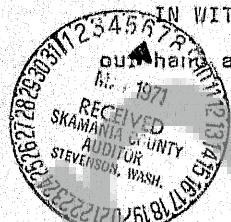
73400

SATISFACTION OF HOSPITAL LIENS

BOOK E PAGE 370

275

KNOW ALL MEN BY THESE PRESENTS, That the undersigned does hereby certify and declare that certain Hospital Liens filed against the list of person attached to this release and showing the filing numbers of said records in the office of the County Skamania, State of Washington for hospitalization, care and/or services performed, together with the account or debt thereby secured is fully paid satisfied and discharged.



IN WITNESS WHEREOF, the undersigned lien claimant has hereunto set (our hand and seal this 5th day of May 1971.

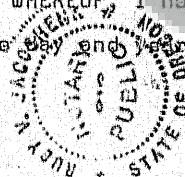
Portland Adventist Hospital

By Dale Hanson

STATE OF OREGON }
County of Multnomah } ss

BE IT REMEMBERED That on this 5th day of May 1971 before me, the undersigned, a Notary Public in and for said County and State, personally appeared the within named Dale Hanson known to me to be the identical individual as described in and who executed the within instrument and acknowledged to me that he executed the same freely and voluntarily.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal the 5th day of May 1971 last above written.



Notary Public for Oregon

My Commission expires My Commission Expires July 9, 1975

72173

Hospital Lien

Portland Adventist Hospital

MARY M. WHITTAKER

STATE OF ~~WASHINGTON~~ WASHINGTONCounty of Skamania ss.

I certify that the within instrument was received for record on the 3 day of June, 1972, at 11.0 o'clock A.M., and recorded in book E on page 333 Record of General of said County.

Witness my hand and seal of County affixed.

H. H. Treadwell
County Clerk-Recorder.
By E. M. M. M. M. Deputy.

REGISTERED	<u>E</u>
INDEXED: DIR.	<u>E</u>
INDIRECT:	<u>E</u>
RECORDED:	<u>E</u>
COMPARED	<u>E</u>
MAILED	<u>6-4-72</u>