ETATE OF CONTINUATION ANELASE ASSOCIATED TO TRANSPORT FOR THE PORT CON COMMITTAL INCAURD TO MAL STATE 15190 TO MAN BYATE MIC C-/2000 and appropriate fee parts OC NOT TABLE OR TAPE ANY DIMENSION DEPENDENCE OF THE SECONDER AND ADDRESS OF THE SECONDER ANY DIMENSION ADDRESS OF THE SECONDER ANY DIMENSION OF THE SECONDER AND ADDRESS OF THE SECONDER ADDRESS OF THE SECONDER AND ADDRESS OF THE SECONDER AND ADDRESS OF THE SECONDER AD writinged on additional sheets, preferably $81/7 \times 11^{n}$. Only one copy of such additional sheets, preferably $81/7 \times 11^{n}$. Only one copy of such additions, etc. may be on any size paper that is convenient for the secured party. File UCC3A st each place where a UCC1A or UCC2A has previously been filed. When a copy of the sacurity agreement is used as a financing statement if is requested that it be accompanied by a completed UCC-21 form. A SEPARATE FORM UCC3A SHOULD BE USED IF ONE OF THE MULTIPLE TRANSACTIONS IS AN ASSIGNMENT. MAN OF THE OLD STATE TA - Control Control THERON A. FOOTE JUDITH A. FOOTE WESTERN BANK 18. Mailing Address(es); Filing Officer Use O SHASTA PLAZA BRANCH P. O. BOX 500 28. Address of Secured Party from which security information obtainable: SPRAGUE RIVER, OR 97639 State Preserving Sectored Manual Statement which is filled in the real active, re That Preserving Sectored Ma. M82, Page 6615 Date State May P. O. BOX 1864 KLAMATH FALLS, OR 97603 The original finance tweet the foregoin currer Party foregoin Hay 26 cing sta cured Party, b shown above (Fee \$2,00) C. TRANSFALLOW STATISTICS 19_82 The Second Part Second Party of D. ASSIGNMENT The Securad Party certifies that the Secured Party as assigned to the Assignee whose name and address shown in 3A and 38 below. Secured Party as under the financing steament basing the fill number shown above in the following property (describe below) (fee \$2.00) E OTHER PARTIAL RELEAS Seath as Fee \$2.00) FULL RELEASE D - 200 D 3A. Assignee of Secured Party(les) if any: - S2.00 Return: 3B. Address of Assignee fr security information ob Western Back Klamath Falls OR 97601 Byz WESTERN BA Signature(s) of Debtor(s This form of Statement approved by the Secretary of State. ure(s) of Secured Parts STATE OF OREGON: I hereby certify that the within instrument was received and filed for record on the <u>31st</u> day of <u>August</u> <u>A.D.</u>, 19<u>84</u> at 10:59 o'clock <u>A</u> М, on page 15110. Fee: \$ 4.00 EVELYN BIEHN, COUNTY CLERK by: TAm Deputy