789 FEB 29 FH 4 04

97576	789 FED 29	<u>54 4 04</u>	
and The State State State State State State			
 PLEASE TYPE THIS FORM. PLEASE TYPE THIS FORM. Enclose fee of S3.75 per name listed p Send the Alphabetical, Numerical and retained by party making the filing, retained by party making the filing. If the space provided for any itemIs 0 need be presented to the filing officer. DO NOT STAPLE OR TAPE ANYTHI 5. At the time of original filing, filing 0 of long schedules of collateral, two cor 6. File UCC3 with Secretary of State or 7. A SEPARATE FORM UCC3 SHOULD This STATEMENT is presented to filing offi- 	COMMERCIAL CODE_STATE RM COMMERCIAL CODE_STATE TERMINAT lus S2.00 per trade name. It more th Acknowledgment copies with interl on the form is inadequate the item! Long schedules of collateral, indent. NG TO LOWER PORTION OF THE fictor will return acknowledgment of ises should be presented and one will obset USED IF ONE OF THE MULT DE USED IF ONE OF THE MULT	res, etc. may be on any size paper. The over S FORM. opy to the assignee if noted on form or secured in be returned. aw.	Filing Officer Use Only
Lancaster, James R.		to the from which	Vol.M89/Page 3559
Lancaster, Janice n.	28. Ad	dress of Secured Party from which curity information obtainable:	
B. Mailing Address(es): Star Route, Box 145	907	Roval Avenue, Suile C	
Chemult, OR 97731	Medf	ord, OR 97504	289
		3522 Date filed 2-	D. ASSIGNMENT
This statement refers to original Finance A. CONTINUATION	from the collateral bearing the financing statement bearing the number shown above, the Sec. Party releases all or part of the lowing (describe below). Indicate papTIAL RELEASE	C. TERMINATION the Secured Party certifies that the Se- cured Party no longer claims a security red interest under the financing statement fol- (Fee S3.75)	 D. ASSIGNMENT The Secured Party certifies that the Secured Party has assigned to the Assignee whose name and address is shown in 4A and 4B below, Secured Party's right under the financing statement, bearing the file number shown above in the following property: (describbelow) (Fee S3.75) 4A. Assignee of Secured Party(ies) if any: South Valley State Bank
E. OTHER	FULL RELEASE		48. Address of Assignee from which security information obtainable: P.O. Box 5210 Klamath Falls, OR 97601
		TRENDWEST	PARTICIPATION NO. 500
	·		
By:Signature(s) of Debi This form of Statement approved b STANDARD FORM-UNIFORM COM 9/1/81 Keturn, WI	WERCIAL CODE-FORM UCC-3 61	By: Sharon M. Signal Sharon M. FILING OFFICER - ALPHARETICAL	anaging Agent M U Alla ure(s) of Secured Path(ics) or Assignce(s) Vaughn, Vige President
STATE OF OREGON: C	OUNTY OF KLAMATH.	ss. ain <u>Title Co.</u> PM ar	the <u>28th</u> da
Filed for record at requ ofFeb.	est of <u>Mounts</u> A.D., 19 <u>89</u> at of <u>Mortga</u>	<u>4:04</u> oclock <u></u> nn, <u></u> ges on Page	nd duly recorded in Vol 3559 County Clerk
FEE \$5.00			

Vol. <u>m89</u> Pege 3559