3228	1025487	Vol. <u>mal</u> Page <b>161</b>
STATE OF C UNIFORM COMMERCIAL COD Statement of continuation, assignment, r	E STANDARD FORM UCC-3	VUI
ASE TYPE SURE TO COMPLETE AND SIGN THOSE PORTIONS ID INSTRUCTIONS ON BACK BEFORE FILLING OUT	THAT APPLY. CUSTOMER	
Check (x) one: DEPENTOR NAME, CONSIGNEE, C (From original filing or as previously amended)	93-0864094	M91/16121
Monti's Construction Inc.		
(Last Name) (First Name) BTOR MAILING ADDRESS:	(Middle) Total Debtor Names:	
1504 Oregon Avenue		
Klamath Falls, OR 97601		Reserved for Filing Officer Use
Check (x) one: Ø SECURED PARTY, CONSIGNOR NAME AND ADDRESS (from original filing or as	C. ASSIGNEE NAM	IE AND ADDRESS (if any)
Liberty Savings and Loan Asso		
Liberty Savings and Loan Asso		
Telephone Number:	Telephone Numb	
This statement refers to original Financing Statement	t No	
K TERMINATION The Secured Party no longer cla	aims a security interest under the financing statement	bearing the file number shown above.
ASSIGNMENT The Secured Party assigns to th	e Assignee whose name and address is shown, secur	ed Party's rights under the financing statement bearing
CONTINUATION The original financing statement Effective only if sub	t bearing the file number shown above is sain chocked mitted within six months prior to expiration date.	own above, the Secured Party releases the following.
RELEASE From the collateral described in (describe below). Choose one	n the financing statement bearing the file further str Release of all Collateral Partial Release e number shown above is amended as described belo	RELEASE DOES NOT TERMINATE DEBT
AMENDMENT Financing statement bearing file is area can be used in listing collateral to be Released, a	Amendment description, and other information:	
		inducing
btor hereby authorizes the Secured Party to file a carbo atement under ORS Chapter 79.	on, photographic or other reproduction of this form, fir	nancing statement or security agreement as a financing
obtor hereby authorizes the Secured Party to file a carbo atement under ORS Chapter 79. By:	By:	nancing statement or security agreement as a financing
By:	By: Required Signature(s)	
By:	By: Required Signature(s) F CONTINUATION, AMENDMENT, AS Illing officer pursuant to ORS Chapter 79.	SIGNMENT, LAPSE - FORM EFS-3
By:	By: Required Signature(s)	SIGNMENT, LAPSE - FORM EFS-3
By:	By: Required Signature(s) F CONTINUATION, AMENDMENT, AS Illing officer pursuant to ORS Chapter 79.	SIGNMENT, LAPSE - FORM EFS-3
By:	By: Required Signature(s) F CONTINUATION, AMENDMENT, AS Illing officer pursuant to ORS Chapter 79.	SIGNMENT, LAPSE - FORM EFS-3
By:	By: Required Signature(s) F CONTINUATION, AMENDMENT, AS Illing officer pursuant to ORS Chapter 79.	SIGNMENT, LAPSE - FORM EFS-3 amendments:
By:	By:	Source of Payment
By:	By:	SIGNMENT, LAPSE - FORM EFS-3 amendments:
By:	By:	SIGNMENT, LAPSE - FORM EFS-3 amendments:  Source of Payment. Cash  Check  #
By:	By:	Source of Payment. Cash Concerned C
By:	By: Required Signature(s) E CONTINUATION, AMENDMENT, AS In listing Farm Product changes, deletions, additions, By: Signature of Secured Party Lester E. Bradley Vice President DPY TO. (name and address)	SIGNMENT, LAPSE - FORM EFS-3 amendments:  Source of Payment. Cash  Check  # Visa/MasterCard (See reverse of Original Copy) Submit completed form to: Secretary of State, UCC Section
By:	By: Required Signature(s) E CONTINUATION, AMENDMENT, AS Iting officer pursuant to ORS Chapter 79. In listing Farm Product changes, deletions, additions, By: Signature of Secured Party Lester E. Bradley Vice President OPY TO. (name and address) Inc.	SIGNMENT, LAPSE - FORM EFS-3 amendments:  Source of Payment Cash Check # Visa/MasterCard (See reverse of Original Copy) Submit completed form to:
By:	By: Required Signature(s) E CONTINUATION, AMENDMENT, AS Iting officer pursuant to ORS Chapter 79. In listing Farm Product changes, deletions, additions, By: Signature of Secured Party Lester E. Bradley Vice President OPY TO. (name and address) Inc.	SIGNMENT, LAPSE - FORM EFS-3 amendments:  Source of Payment Cash Check # Visa/MasterCard (See reverse of Original Copy) Submit completed form to: Secretary of State, UCC Section Capitol Bidg., Room 41 Salem, OR 97310 (503) 378-4146
By:	By: Required Signature(s) E CONTINUATION, AMENDMENT, AS Iting officer pursuant to ORS Chapter 79. In listing Farm Product changes, deletions, additions, By: Signature of Secured Party Lester E. Bradley Vice President OPY TO. (name and address) Inc.	SIGNMENT, LAPSE - FORM EFS-3 amendments:  Source of Payment. Cash Check   #
By:	By:	SIGNMENT, LAPSE - FORM EFS-3 amendments:  Source of Payment Cash Check   # Visa/MasterCard (See reverse of Original Copy) Submit completed form to: Secretary of State, UCC Section Capitol Bidg. Room 41 Salem, OR 97310 (503) 378-4146
By:	By:	SIGNMENT, LAPSE - FORM EFS-3 amendments:
By:	By	SIGNMENT, LAPSE - FORM EFS-3 amendments:
By:	By	SIGNMENT, LAPSE - FORM EFS-3 amendments:

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