

30598

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STATE OF OREGON
Corporation Division - UCC
Public Service Building
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327
(503) 986-2200 Facsimile (503) 373-1168

THIS SPACE FOR OFFICE USE ONLY

Vol. M96 Page 40324**UCC-3 STATEMENT OF TERMINATION, CONTINUATION, ASSIGNMENT, RELEASE, AMENDMENT**

PLEASE TYPE OR WRITE LEGIBLY. READ INSTRUCTIONS BEFORE FILLING OUT FORM.

This Financing Statement is filed to perfect a security interest in the UCC-3 Chapter 9A. The financing statement remains effective for a period of five years from the date of filing, unless renewed for additional periods as provided for by ORS Chapter 9A. A certified, non-judicial, written reproduction of this form, Financing Statement, security agreement may be filed as a financing statement under ORS Chapter 9A.

A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT

No.: _____ Date Filed: _____

B. TYPE OF AMENDMENT

- ☐ **TERMINATION. (NO FEE)** The Secured party certifies that they no longer claim interest under the financing statement bearing the file number shown in SECTION A.
- ☐ **CONTINUATION.** Submitted within six months prior to expiration date.
- ☐ **ASSIGNMENT.** The Secured Party assigns to the Assignee whose name and address is shown in SECTION E and bearing the file number shown in SECTION A.
- ☒ **RELEASE. RELEASE DOES NOT TERMINATE DEBT.** From the collateral described in the financing statement bearing the file number shown in SECTION A, the Secured Party releases the following: (describe in SECTION G.).

Choose one:

☐ Release of all Collateral☒ Partial Release

- ☐ **AMENDMENT.** Financing statement bearing file number shown in SECTION A is amended as described in SECTION G. Signature of Debtor required in most cases.

C. DEBTOR NAME(S)1. EDWARD L. SNOOK2. KATHERINE K. SNOOK

3. _____

DEBTOR MAILING ADDRESS:

D. SECURED PARTY(IES) NAME AND ADDRESS

GREENVIEW FINANCIAL CORP.

P.O. BOX 1570

TUALATIN, OR 97602

Contact Name: _____ Phone No.: _____

E. ASSIGNEE NAME AND ADDRESS (if any)

Contact Name: _____ Phone No.: _____

F. SIGNATURES In accordance with ORS Statutes, **ALL SECURED PARTIES** must sign UCC-3 Filings.By: [Signature]

By: _____

By: _____
Secured Party(ies) SignatureBy: _____
Debtor Signature(s) (if required)

RETURN COPY TO: (name and address). Please do not type or print outside of bracketed area. OR, FAX COPY TO: (name and fax number).

Edward Snook
9935 Simpson Canyon
Klamath Falls, OR
97601

Name: _____

Fax Number: _____

UCC-3 (Rev. 7/94)

FORM 84, UCC-3
Sovereign Law Publishing Company
Division 121 67924 - 800 661-1112

STATE OF OREGON : COUNTY OF KLAMATH: ss.

Filed for record at request of Amerititle the 30th day
of December A.D., 1996 at 3:50 o'clock P. M., and duly recorded in Vol. M96
of Mortgages on Page 40324

FEE \$5.00

Bernetha G. Letsch, County Clerk
by [Signature]