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\$10.00 per form, except Termination

32712

STATE OF OREGON
Corporate Division - UCC
Public Service Building
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327
(503) 986-2200 Facsimile (503) 373-1166

THIS SPACE FOR OFFICE USE ONLY

Vol. M97 Page 4290

UCC-3 STATEMENT OF TERMINATION, CONTINUATION, ASSIGNMENT, RELEASE, AMENDMENT
PLEASE TYPE OR WRITE LEGIBLY. READ INSTRUCTIONS BEFORE FILLING OUT FORM.

This Financing Statement is presented to filing officer pursuant to the Uniform Commercial Code. This financing statement remains effective for a period of five years from the date of filing, unless extended for additional periods as provided for by ORS Chapter 79. A carbon, photographic or other reproduction of this form, financing statement or security agreement may be filed as a financing statement under ORS Chapter 79.

A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT

No.: 41118/M92/3276

Date Filed: February 18, 1992

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.

G. COLLATERAL

This area can be used in listing collateral to be Released, Amendment description, and other information.

C. DEBTOR NAME(S)

1. OCHOCO LUMBER COMPANY

2. _____

3. _____

DEBTOR MAILING ADDRESS:

PO BOX 668
PRINEVILLE, OR 97754-0668

D. SECURED PARTY(IES) NAME AND ADDRESS

FIRST INTERSTATE BANK OF OREGON, N.A.
220 W. THIRD STREET
PRINEVILLE, OR 97754

Contact Name: _____ Phone No.: _____

E. ASSIGNEE(S) 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: Carol Bunker, VP

By: _____
Secured Party(ies) Signature

By: _____

By: _____
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).

WELLS FARGO BANK,
NATIONAL ASSOCIATION
ATTN: 8TH FL./ TEAM 1 #3832 (PAC)
201 Third Street, MAC #0187-080
San Francisco, CA 94163

Name: _____

Fax Number: _____

FILING OFFICER COPY - UCC-3 (Rev. 7/85)

STATE OF OREGON : COUNTY OF KLAMATH: ss.

STATE OF OREGON

Filed for record at request of Wells Fargo Bank the 11th day
of February A.D., 19 97 at 1:41 o'clock P.M., and duly recorded in Vol. M97
of Mortgages on Page 4290

FEE \$5.00

Bernetha G. Letsch, County Clerk
by Kathleen Ross