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1399298.1-30-1
91478 Wells FargoSTATE OF OREGON
Corporation Division - UCC
Public Service Building
255 Capitol Street NE, Suite 151
Salem, OR 97310-1227
(503) 986-2200 Facsimile (503) 373-1166

THIS SPACE FOR OFFICE USE ONLY

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.: 318641

Date Filed: 02-02-94

B. TYPE OF AMENDMENT Equipment/Lease No: 6957858141☒ **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. PATTERSON, GARY P

2. PATTERSON, DIANE M.

3.

DEBTOR MAILING ADDRESS:
P. O. BOX 201
MERRILL, OR 97633**D. SECURED PARTY(IES) NAME AND ADDRESS** X00339First Interstate Bank,
Klamath Falls CBC
P.O. Box 608, 601 Main St.

Klamath Falls, OR 97601

Contact Name: Phone No.:

E. ASSIGNEE(S) NAME AND ADDRESS

Contact Name: Phone No.:

F. SIGNATURES. In accordance with ORS Statutes ALL SECURED PARTIES must sign UCC-3 Filings.
First Interstate Bank, PATTERSON, GARY PBy: Attorney In Fact
Wells Fargo Bank, N.A., Successor by Merger to
By: First Interstate Bank of Oregon, N.A.

Secured Party(ies) Signature

By: DEBTOR SIGNATURE NOT REQUIRED

By: Debtor Signature(s) (if required)

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

Data Filing Services 1399298.1-30-1

P.O. Box 275
Van Nuys, CA 91408-0275Name: (818) 909-4717
Fax Number:

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Wells Fargo Bank the 21st day
of April A.D., 19 98 at 11:53 o'clock A. M., and duly recorded in Vol. M98
of Mortgages on Page 13216

FEE \$5.00

By: Bernetha G. Letach, County Clerk