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	STATE OF A		
STATEMENT	o of Continuation, Release, Assi	GNMENTS TERMINATIONS AND ADDRESS	
			ent
his STATEMENT IS pres	THIS FORM FOR COUNTY FIL entred to the county third officer pursuant	ING OFFICER USE ONLY	
1A. Debtor Name(s): MOORE, James L.			
MOORE, Checryl L		MERICA 4A. Assignee of Secured Party	(d any):
18. Debtor Mailing Address(e	a): FARMERS HOME ADMIN 29. Address of Secured Paul		
PO Box 419 Merrill, OR 976		e: 48. Address of Assignes:	
	71	97601	
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and the second se	si Financing Statement number: <u>BK_M84.</u> Pr	and a state of the	19.84
TERMINATION	The Secured Party no longer claims a security inte	nest under the financing statement bearing the file number	shown ohour
ASSIGNMENT			the frencieve
XX CONTINUATION			, are mencing
	The original financing statement bearing the file nu Effective only if submitted with	imber shown above is still effective. In six months prior is expiration date.	
RELEASE	following: (describe below). Choose one:	tin six months prior to expiration data. Iment bearing the file number shown above, the Secured P Release of all collateral Partial release - RELEASE	any releases th
AMENDMENT	Financing statement bearing the file number shown		DOES NOT
	To change secured party's name	and address to: Farm Service Agence	
ancon, photographic or other ra	production of this form, financing statement or secur	ADDITION ADDITION AND ADDITION ADDITIONA ADDITICO ADDI	97601
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