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This STATEMENT is presented for filing pursuant to the California Uniform Commercial Code

1. FILE NO. OF ORIG. FINANCING STATEMENT 36524, Vol M97		1A. DATE OF FILING OF ORIG. FINANCING STATEMENT 04/23/97		1B. DATE OF ORIG. FINANCING STATEMENT 04/16/97		1C. PLACE OF FILING ORIG. FINANCING STATEMENT KLAMATH COUNTY	
2. DEBTOR (LAST NAME FIRST) MATHES, DAVID						2A. SOCIAL SECURITY NO., FEDERAL TAX NO. 542-76-2356	
2B. MAILING ADDRESS 20954 S POE VALLEY ROAD				2C. CITY, STATE KLAMATH FALLS, OREGON		2D. ZIP CODE 97603	
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)						3A. SOCIAL SECURITY OR FEDERAL TAX NO.	
3B. MAILING ADDRESS				3C. CITY, STATE		3D. ZIP CODE	
4. SECURED PARTY NAME SPRECKELS SUGAR COMPANY MAILING ADDRESS P O BOX 2240 CITY WOODLAND STATE CALIFORNIA ZIP CODE 95776						4A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.S.A. NO. 13-3366164	
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE						5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.S.A. NO.	
6. ☐ CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, check here ☐ and insert description of real property on which growing or to be grown in Item 7 below.							
☐ RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 7 below.							
☐ ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.							
☒ TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.							
☐ AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor required on all amendments.)							
☐ OTHER							

7.

8. (Date) JULY 21, 1999		C O D E 1 2 3 4 5 6 7 8	9. This Space for Use of Filing Officer (Date, Time, Filing Office)	
NOT REQUIRED				
By: _____ (TITLE) SPRECKELS SUGAR COMPANY				
By: <i>[Signature]</i> AGRICULTURAL MANAGER				
10. Return Copy to				
NAME ADDRESS CITY AND STATE				

State of Oregon, County of Klamath
Recorded 7/28/99, at 3:31 p. m.
In Vol. M99 Page 30101
Linda Smith.
County Clerk Fees 5.00

UNIFORM COMMERCIAL CODE—FORM UCC-2

Approved by the Secretary of State