

14126

SEND ONLY ONE COPY TO STATE FOR FILING

REORDER FROM
Register, Inc.
 514 PIERCE ST.
 P.O. BOX 218
 ANDOVER, MA 01903
 (617) 481-1713

N

1999 AUG -6 PM 3: 53

UCC-3

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

Vol M99 Page 31906**STATEMENT OF TERMINATION, CONTINUATION, ASSIGNMENT, RELEASE, AMENDMENT**

PLEASE TYPE OR PRINT 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 STATEMENTNo.: 74112 Vol. M94 Pg 661Date Filed: 1-6-94**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.
- Choose one: ☐ Full Assignment ☐ Partial Assignment
- ☐ **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. AMENDMENT INFORMATION

Use this area to list collateral to be Released, Amendment description, and other information.

C. DEBTOR NAME(S)1. GREYHOUND LINES, INC.

2. _____

3. _____

DEBTOR MAILING ADDRESS:

15110 North Dallas Parkway
Dallas, TX 75248

D. SECURED PARTY(IES) NAME AND ADDRESS

FOOTHILL CAPITAL CORPORATION, as Facility Agent
11111 Santa Monica Boulevard, Suite 1500
Los Angeles, CA 90025-3333

Contact Name: _____

Phone No.: _____

E. ASSIGNEE NAME AND ADDRESS (If any)

Contact Name: _____

Phone No.: _____

State of Oregon, County of Klamath
 Recorded 8/06/99. at 3:53 p.m.
 In Vol. M99 Page 31906
Linda Smith,
 County Clerk Fee\$

F. SIGNATURES. In accordance with ORS Chapter 79, ALL SECURED PARTIES must sign UCC-3 Filings.By: FOOTHILL CAPITAL CORPORATION, as Facility AgentBy: [Signature]

Secured Party(ies) Signature

By: _____

Debtor Signature(s) if required

RETURN ACKNOWLEDGMENT LETTER TO: (Include name, address, and identifier for the debtor listed above. Limit the identifier to eight characters. REFER TO INSTRUCTION, NUMBER 7.) Please do not type or print outside of bracketed area.

RETURN DOCUMENT TO:
CHICAGO TITLE INSURANCE COMPANY
 171 N. Clark Street -ML: 04SP
 Chicago, IL 60601
 ATTN: ROCHELLE DEMOSS

FEES

Make check for \$10.00 payable
 to "Corporation Division"
 No fee for Termination.

NOTE: Filing fees may be paid with VISA or MasterCard.
 The card number and expiration date should be submitted
 on a separate sheet of paper for your protection.

DO NOT SUBMIT DUPLICATES OF THIS FORM AND/OR ATTACHMENTS.