•	
•	
	=
	=
	=
	Ξ
	=
	Ξ
	3
	Ξ
	=
	Z
	=
	=
	Ĩ
	=
	=
	=
	3
	=
	=
	Ξ
	=
	Ξ
	=
	Ξ
	Ξ
	3
•	=
	Ξ
	=

State of Oregon, Country of Klamath Recorded (6/05/2002					Vol_MO	2_Page_33	032	
NAME & PHONE OF CONTACT AT FILER (optional) Phone (800) 331-3282 Fax (818) 662-4141 SEND ACKNOWLEDGEMENT TO: (Name and Mailling Address) UCC Direct Services - P.O. Box 29071 Glendale, CA 91209-9071 INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25541 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25541 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENDMENT 6663 VM95 P25541 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25541 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENDMENT 6663 VM95 P25541 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENDMENT 6663 VM95 P25541 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENDMENT 6663 VM95 P25541 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OF								
Phone (800) 331-3282 Fax (818) 662-4141 SEND ACKNOWLEDGEMENT TO: (Name and Mailling Address) UCC Direct Services 511356 BANK OF AM P.O. Box 29071 5405292.1-30-1 Glendale, CA 91209-9071 INITIAL FINANCING STATEMENT FILE # G663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # CONTINUATION: Effectiveness of the Financing Statement demilified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable low. TERMINATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Community Statement is continued for the additional period provided by applicable low. ASSIGNMENT (full or partial). Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (FARTY INFORMATION). This Amendment affects Period of the Secured Party authorizing this Communition Statement is continued for the additional period provided by applicable low. ASSIGNMENT (full or partial). Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. ASSIGNMENT (full or partial). Give name of assignee in item 7a or 7b and address of assignee in 1 tem 8 and/or 77. ASSIGNMENT (full or partial). Give name of assignee in 1 tem 7a or 7b and address of assignee in 1 tem 8a and/or 7b and/or new address (the address Change) in tem 7a or 7b and/or new address (the address Change) in tem 7c. JONE OF A STATE POSTAL CODE SUFFIX ADD DAME. SUFFIX ADD LINFO RESTATEMENT AME MIDDLE NAME SUFFIX MAILTING ADDED INFORMATION: Ga. ORGANIZATION ANAME FIRST NAME MIDDLE NAME MIDDLE NAME SUFFIX TAX IDE: SSN or EIN ADDL LINFO RE 76: TYPE OF ORGANIZATION TO ADDRESS TAX IDE: SSN or EIN ADDL LINFO RE TO THE ABOVE SPACE IS FOR FILLING THE TO THE TOTAL ACT TO THE ADDRESS TAX IDE: SSN	UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY			NT :	State of Oregon, County of Klamath Recorded 06/05/2002 9:10 a.m.			
SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) UCC Direct Services 511356 BANK OF AM P.O. Box 29071 5405292.1-30-1 Glendale, CA 91209-9071 INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENOMENT of 100 per folial for record John folial file of 100 per folial for record John folial file of 100 per folial f	NAME & PHONE OF CO		The state of the s					
UCC Direct Services 511356 BANK OF AM P.O. Box 29071 5405292.1-30-1 Glendale, CA 91209-9071 INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The ABOVE SPACE IS FOR FILING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR FILING STATEMENT FILI		· · · · · · · · · · · · · · · · · · ·						
P.O. Box 29071 Glendale, CA 91209-9071 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY This Financing Statement and members of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement in CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INF-ORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of insight with the partial provided appropriate information in items 5 and/or 7. Assignment (Finance change) in item 7a or 7b and/or new address (if address change) in item 7c. The Amendment affects Debtor or Secured Party of record. Check only one of insight of the work o	SEND ACKNOWLEDGE	MENT TO: (Name an	d Mailing Address)					
P.O. Box 29071 Glendale, CA 91209-9071 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY This Financing Statement and members of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement in CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INF-ORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of insight with the partial provided appropriate information in items 5 and/or 7. Assignment (Finance change) in item 7a or 7b and/or new address (if address change) in item 7c. The Amendment affects Debtor or Secured Party of record. Check only one of insight of the work o								
Glendale, CA 91209-9071 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath The Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement Continued for the additional peniod provided by applicable law. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional peniod provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7 or 7 b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record Check only gag of these low boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 8a or 6b; also give new DELETE name: Give record name ADD name: Complete item 7a or 7b and altower hance (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. DELETE name: Give record name ADD name: Complete item 7a or 7b, and altower hance (if name change) in item 7a or 7b and or 8b; also give new DELETE name: Give record name ADD name: Complete item 7a or 7b, and altower hance (if name change) in item 7a; also complete item 7a; displication 7b; and participation or 7b; and p	UCC Direct	Services	511356 BAN	K OF AM				
INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Termination Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Termination Statement is reminated with respect to the security interest(s) of the Secured Party authorizing this Termination Statement is reminated with respect to the security interest(s) of the Secured Party authorizing this Termination Statement is reminated above with respect to the security interest(s) of the Secured Party authorizing this Termination Statement is reminated provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMBENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these the box boxes. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMBENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of less signor in item 9. AMBENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of less signor in item 9. ADD name: Complete item 7a or 7b. and address. Give current record name in item 8a or 6b. also give new DELETE name: Give record name ADD name: Complete item 7a or 7b. and also give name of item 7a or 7b. and also give name of item 7a or 7b. and also give name of item 7a or 7b. and also give name of item 7a or 7b. and also give name of item 7a or 7b. and also give name of item 7a or 7b. and also give name of a sesignee in 7c; and also give name of	- P.O. Box 29	9071	5405292.1-30)-1				
INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath Title Financing Statement Amendment in the fide of the correction of the secured for recorded in the report of the file (for record) (or recorded in the report of the file) of the file (for record) (or recorded in the report of the file) of the file) of the secured Party authorizing this Termination Statement is continual for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. ADD name: Complete item 7a or 7b and address. Give record name in item 8a or 6b; also give new and/or address. Give current record name in item 8a or 6b; also give new and/or address. Give current record name in item 8a or 6b; also give new and/or address. Give current record name in item 8a or 6b; also give new and/or address. Give current record name in item 8a or 6b; also give new and/or address. Give record name in item 8a or 6b. CURRENT RECORD INFORMATION:	Glendale, C	A 91209-9071						
INITIAL FINANCING STATEMENT FILE # 6663 VM95 P25641 09-26-95 CC OR Klamath Title Financing Statement Amendment in the fide of the correction of the secured for recorded in the report of the file (for record) (or recorded in the report of the file) of the file (for record) (or recorded in the report of the file) of the file) of the secured Party authorizing this Termination Statement is continual for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. ADD name: Complete item 7a or 7b and address. Give record name in item 8a or 6b; also give new and/or address. Give current record name in item 8a or 6b; also give new and/or address. Give current record name in item 8a or 6b; also give new and/or address. Give current record name in item 8a or 6b; also give new and/or address. Give current record name in item 8a or 6b; also give new and/or address. Give record name in item 8a or 6b. CURRENT RECORD INFORMATION:	1							
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. AND name: Complete item 7a or 7b. and also mane (in ame change) in item 7a or 7 billion of the security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of items of assignee in 7c; and also give name of assignor in item 9. ADD name: Complete item 7a or 7b. and also and or name in item 6a or 6b. Debtor or					HE ABOVE SPACE I	S FOR FILING OFFICE USE	ONLY	
CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check ong of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 8a or 6b; also give new address (if address change) in item 7c. DELETE name: Give record name ADD name: Complete item 7a or 7b. and also, item 7c; also complete items 7d-7g (if applice CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME CRAMER CHANGED (NEW) OR ADDED INFORMATION: 7b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY NOR					V to b	e filed [for record] (or record	AMENDMENT is ed) in the	
CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check ong of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 8a or 6b; also give new address (if address change) in item 7c. DELETE name: Give record name ADD name: Complete item 7a or 7b. and also, item 7c; also complete items 7d-7g (if applice CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME CRAMER CHANGED (NEW) OR ADDED INFORMATION: 7b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY NOR	X TERMINATION:	Effectiveness of th	e Financing Statement identified above	e is terminated with respect to security inte	rest(s) of the Secured	Party authorizing this Termi	nation Statemer	
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Debtor or Debtor or Debtor or Order of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address. Give current record name in item 8a or 6b; also give new Intem 7a or 7b and/or new address (if address change) in item 7c. CHANGE name and/or address. Give current record name in item 8a or 6b; also give new Intem 6a or 6b. DELETE name: Give record name Intem 6a or 6b. ADD name: Complete item 7a or 7b, and also item 7c; also complete item 7c; also complete items 7d-7g (if applications) in item 7c. CHANGE INFORMATION: Ba. ORGANIZATION'S NAME CRAMER CHANGED (NEW) OR ADDED INFORMATION: Ta. ORGANIZATION'S NAME FIRST NAME ROBERT A WIDDLE NAME SUFFIX WIDDLE NAME SUFFIX MIDDLE NAME SUFFIX TAX ID#: SSN or EIN ADDL INFO RE ORGANIZATION DEBTOR To. TYPE OF ORGANIZATION DEBTOR To. TYPE OF ORGANIZATION To. JURISDICTION OF ORGANIZATION DEBTOR To. TYPE OF ORGANIZATION To. NON	CONTINUATION			e with respect to the security interest(s) of	the Secured Party aut	horizing this Continuation St	atement is	
AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 8a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. DELETE name: Give record name mane: Complete item 7a or 7b, and also tem 7c. also complete item 7a or 7b, and also tem 7c. also complete item 7c. als	continued for the ad	iditional period provide	o by applicable law.					
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 8a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7a or 7b. and also item 7a or 7b and/or new address (if address change) in item 7a or 7b. and also item 7a or 7b and/or new address (if address change) in item 7a or 7b. and also item 7a or 7b. and also item 7a or 7b. and also item 7a or 7b and/or new address (if address change) in item 7a. CURRENT RECORD INFORMATION: [5a. ORGANIZATION'S NAME] [5b. INDIVIDUAL'S LAST NAME] [5c. INDIVIDUAL'S LAST NAME] [7c. ORGANIZATION'S NAME] [7c. ORGANIZATION'S NAME] [7c. INDIVIDUAL'S LAST NAME] [7d. INDIVIDUAL'S LA						<u> </u>		
CURRENT RECORD INFORMATION: 6a ORGANIZATION'S NAME	Also check one of the	e following three bo	oxes and provide appropriate info ent record name in item 6a or 6b; also	ormation in items 6 and/or 7. give new DELETE name: Give r	record name	ADD name: Complete item 7:		
Ga. ORGANIZATION'S NAME FIRST NAME MIDDLE NAME SUFFIX			id/or new address (if address change)	in item /c to be deleted in item 6	aoreb.	tem 7c; also complete items	/d-/g (if applica	
CRAMER CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY TAX ID#: SSN or EIN ADD'L INFO RE ORGANIZATION DEBTOR 7e. TYPE OF ORGANIZATION DEBTOR NON					VA.,	***************************************		
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	6b. INDIVIDUAL'S LAST	Γ NAME		FIRST NAME	MIDDLE	IAME	SUFFIX	
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY TAX ID#: SSN or EIN ADD'L INFO RE ORGANIZATION DEBTOR 7c. TYPE OF ORGANIZATION 7c. JURISDICTION OF ORGANIZATION TO ORGANIZATION DEBTOR NON	CRAMER			ROBERT	A			
7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY TAX ID#: SSN or EIN ADD'L INFO RE ORGANIZATION DEBTOR 7c. TYPE OF ORGANIZATION 7c. TYPE OF ORGANIZATION OF ORGANIZATION 7c. TYPE OF ORGANIZATION OF ORGANIZATION NON	CHANGED (NEW) OF	R ADDED INFORM	ATION:					
MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY TAX ID#: SSN or EIN ADD'L INFO RE ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any NON	7a. ORGANIZATION'S	NAME						
MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY TAX ID#: SSN or EIN ADD'L INFO RE ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any NON				I COOT NAME			Lauren	
TAX ID#: SSN or EIN ADD'L INFO RE ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any DEBTOR	/B. INDIVIDUAL'S CAST NAME		PIRST NAME	MIDDLE	IAME	SUFFIX		
TAX ID#: SSN or EIN ADD'L INFO RE ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any DEBTOR	MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY	
ORGANIZATION DEBTOR NON								
	TAX ID#: SSN or EIN	ORGANIZATION	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGA	NIZATIONAL ID #, if any	□ NON	
	AMENDMENT (COLL		:): check only <u>one</u> box.					
	· —	deleted or adde	d' or Aine entre	eral description, or describe collateral	assigned.			
	· —	deleted or adde	di di dive entre la testaten conste	eral description, or describe collateral	assigned.			
	· —	deleted of adde	d, or give entired lessered collecte	ral description, or describe collateral	_assigned.			
	· —	deleted of adde	d, or give entire lessaten conste	ral description, or describe collateral	assigned.			
	· —	deleted or adde	u, or give entire Testaten conste	ral description, or describe collateral	assigned.			
	· —	deleted of	u, or give entire Testateu conste	ral description, or describe collateral	assigned.			
	· —	deleted of	u, or give entire Testaten conste	ral description, or describe collateral	assigned.			
	· —	deleted of	u, or give entire Testaten conste	ral description, or describe collateral	assigned.			
	· —	deleted of	u, or give entire Testateu conate	ral description, or describe collateral	assigned.			
	· —	deleted of	u, or give entire Testateu conate	ral description, or describe collateral	assigned.			
VAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which	Describe collateral					Amendment authorized by a	Debtor which	
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.	NAME OF SECURED adds collateral or adds the	PARTY OF RECOR	RD AUTHORIZING THIS AMEND	MENT (name of assignor, if this is an Ass	signment). If this is an		a Debtor which	
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME	NAME OF SECURED adds collateral or adds to ga ORGANIZATION'S	PARTY OF RECOR he authorizing Debtor, NAME	RD AUTHORIZING THIS AMEND	MENT (name of assignor, if this is an Ass	signment). If this is an		a Debtor which	
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME Bank of America	NAME OF SECURED adds collateral or adds to 9a. ORGANIZATION'S Bank of America	PARTY OF RECOR he authorizing Debtor, NAME	RD AUTHORIZING THIS AMEND	DMENT (name of assignor, if this is an Ass y a Debtor, check here and enter name	signment). If this is an	ing this Amendment.		
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME	NAME OF SECURED adds collateral or adds to 9a. ORGANIZATION'S Bank of America	PARTY OF RECOR he authorizing Debtor, NAME	RD AUTHORIZING THIS AMEND	DMENT (name of assignor, if this is an Ass y a Debtor, check here and enter name	signment). If this is an	ing this Amendment.		

UCC FINANCING STATEMENT AMENDMENT ADDENDUM						
FOLLOW INSTRUCTIONS (front and back) CAREFULLY						
11. INITIAL FINANCING STATEMENT F	ILE # (same as item 1a on Ame	ndment form)				
12. NAME OF PARTY AUTHORIZING T 12a. ORGANIZATION'S NAME Bank of America	HIS AMENDMENT (same as	item 9 on Amendment form)				
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SUFFIX				

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Debtor Information: Name: CRAMER, ROBERT A

Address: 15108 KENO WORDEN RD, KLAMATH, OR 97603

Tax ID: Org. Type:

Org. Jurisdiction:

Org. ID: