## 2007-000792 Klamath County, Oregon

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LAANE SPECIAL CONTACT AT FILER (optional)  LOAN SERVICING  SOCIATION STATEMENT FILER  PO BOX 1647  BELLEVUE, WA 98009-1647  INITIAL FINANCING STATEMENT FILER  VOL M04 PG 86751-52 12/20/04  The special speci	OLLOW INSTRUCTIONS (front and back) CAREFULLY	IENT				Fee: \$21.0	
FIRST MUTUAL BANK PO BOX 1647 BELLEVUE, WA 98009-1647  WOL Mod PG 86751-52 12/20/04  ▼ TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is CONTINUATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Termination Statement is CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Termination Statement is CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is CONTINUATION: The Amendment affects Personal Party authorizing this Termination Statement is ASSIGNMENT (full or partial): Give name of assignee in litem 7a or 7b and address of assignee in litem 7c, and also give name of assigner in item 9.  AMENDMENT (PARTY INFORMATION): This Amendment affects Personal Interest and address Cive current record name in item 8a or 6b; also give new party of record. Check only one of these two Doxes.  This ANGE name and/or address. Give current record name in item 8a or 6b; also give new party of record. Check only one of these two Doxes.  This ANGE name and/or address. Give current record name in item 8a or 6b; also give new party of record. Check only one of these two Doxes.  The ANGE name and/or address. Give current record name in item 8a or 6b; also give new party of record check only one of these two Doxes.  ANGE NOTE TO ADDRESS IN TABLE POSTAL CODE COUNTRY  TANDER SNO REIN ADDITION FOR TABLE POSTAL CODE COUNTRY  TAXIO # SNO REIN ADDITION FOR TABLE POSTAL CODE COUNTRY  TAXIO # SNO REIN ADDITION FOR TABLE POSTAL CODE	A. NAME & PHONE OF CONTACT AT FILER [optional]						
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DEBTOR(S): LANGFELDER, BERNARD K & SUSAN M, 51-113861-07