## 2008-007007 Klamath County, Oregon

0004604920080007	

NCING STATEMENT AMENDMENT 05/13/2008 08:33:19 AM

A. NAME & PHONE OF CONTACT AT FILER [optional]
Lisa Grijalva (916) 714-2240

B. SEND ACKNOWLEDGEMENT TO: (Name and Address)

Stockmans Bank, a Division of PreimerWest Bank
P.O Box 1150
Elk Grove, Ca 95759

2008 08:33:19 AM Fee: \$21.00

P.O Box 1150						
Elk Grove, Ca 95759						
		·				
		THE ABOVE S	SPACE IS FO	R FILING OFFICE US	E ONLY	
. INITIAL FINANCING STATEMENT FILE	#	11		IANCING STATEMEN		
VOL M03 Page 75714-16				to be filed [for record] (or record) in the REAL ESTATE RECORDS.		
TERMINATION: Effectiveness of the F	inancing Statement identified above is	terminated with respect to security interest(s) of			ination Statement.	
	Financing Statement identified above v	with respect to security interest(s) of the Security				
ASSIGNMENT: (full or partial): Give na	ime of assignee in item 7a or 7b and ac	ddress of assignee in item 7c; and also give na	me of assignor	in item 9.		
AMENDMENT (PARTY INFORMATION): Also check one of the following three boxes and	This Amendment affects Debtor	or Secured Party of record Check	only one of th	ese two boxes.		
CHANGE name and/or address: Give on name (if name change) in item 7a or 7b and/or	surrent record name in item 6a or 6b; also ç or new address (if address change) in item	give new DELETE name: Give recom 7c. to be deleted in item 6a or 6b.		ADD name: Complete iten c; also complete items 7d-7g	n 7a or7b, and also it g (if applicable).	
CURRENT RECORD INFORMATION:  6a. ORGANIZATION'S NAME						
Debtor: Randy Barnes  6b. INDIVIDUAL'S LAST NAME			MIDDLE NAME SUFFIX			
		TINGT WAINE	MIDDLE	NAME	SUFFIX	
CHANGED (NEW) OR ADDED INFORMA 7a. ORGANIZATION'S NAME	TION:				· · · · · · · · · · · · · · · · · · ·	
7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX	
MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY	
ADD'L. INFO RE	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	ON 7a. ORG	 GANIZATIONAL ID #, i	f anv	
ORGANIZATION DEBTOR				·	NC	
AMENDMENT (COLLATERAL CHANGE):						
Describe collateral  deleted or  added, o	r give entire [_] restated collateral des	scription, or describe collateral 🔲 assigned.				
e and a contract of the contra		and the state of t			the transfer of the	
				<i>i</i>		
AME OF SECURED PARTY OF RECORD	AUTHORIZING THIS AMENDMI	ENT (name of perigner if this is an Assignment)	If this is an Amen	dment authorized by a debt	or which adds	
AME OF SECURED PARTY OF RECORD flateral or adds the authorizing Debtor, or if this is a T	Termination authorized by a Debtor, check	here and enter name of DEBTOR authorizing	this Amendment			
9a, ORGANIZATION'S NAME						
Stockmans Bank, now kn	own as, Stockmans B	ank, a Division of Premie	MIDDLE		SUFFIX	
9b. INDIVIDUAL'S LAST NAME		1 II/O ) IAVIAIC	14110000			
OPTIONAL FILER REFERENCE DATA	<b></b>	1				
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an# 1201080001 Je FILING OFFICE COPY NATIONAL U						