

112587

BOOK 126 PAGE 505

UCC-3 CHANGE STATEMENT  
Laws Chapter 601B RCW

PLEASE TYPE FORM - IF AN ERROR IS MADE, CORRECT ALL COPIES

2 FOR OFFICE USE ONLY - DO NOT WRITE IN THIS BOX

1. CREDITOR'S (see instruction #2)

XX PERSONAL (last first middle name and address)  
BUSINESS (legal name and address)Kaden, Larry L  
Kaden, Tracy L  
N. Pl. 25 L Mathews Rd  
Washougal, Wa 98671

Debtor 1

SSN: 544 40 9902

FEIN:

Debtor 2

SSN:

FEIN:

TRADE NAME DBA AKA

3 SECURED PARTY (ES) (name and address)

West One Bank, Oregon  
PO Box 2882  
Portland, Or 972084 ASSIGNEE(S) OF SECURED PARTY (ES) (if applicable  
name and address)

Registered	P
Indexed, UIC	P
Indirect	P
Filed	12/26/91
Mailed	

5 This change statement affects the original filing statement recorded with the Department of Licensing. List one number and date only.  
Original filing number: 2400A Date: May 2, 1991

6 FEES: A \$7.00 filing fee is required for each action checked in box 7, except termination. When requests involve additional sheets are attached for any of the actions, the filing fee for each action shall be \$14.00.

NUMBER OF ADDITIONAL SHEETS ATTACHED

7 Please check one or more of the following actions:

CONTINUATION: The original filing statement between the Debtor(s) and Secured Party(ies), bearing filing number shown in box 5, is still effective.

FULL ASSIGNMENT: All of the Secured Party's rights under the filing statement bearing the number shown in box 5 have been assigned to the Assignee(s). Assignee's name(s) and address(es) appear in box 4.

PARTIAL ASSIGNMENT: The Secured Party's rights under the filing statement bearing the number shown in box 5 to the property described in box 8 have been assigned to the Assignee(s). Assignee's name(s) and address(es) appear in box 4.

AMENDMENT: Filing statement bearing the number shown in box 5, amended as set forth in box 8.

PARTIAL RELEASE: Secured Party releases its interest described in box 8 from the filing statement bearing the number shown in box 5.

XXX TERMINATION: Secured Party releases its interest in the filing statement bearing the number shown in box 5.

8 DESCRIPTION of partial assignment, release, or termination. Attach additional sheets if needed.

9 DEBTOR NAME(S) AND SIGNATURE(S)

TYPE NAME(S) OF DEBTOR(S) AS IT APPEARS IN BOX 1

SIGNATURE(S) OF DEBTOR(S)

SIGNATURE(S) OF DEBTOR(S)

11 RETURN ACKNOWLEDGMENT COPY TO:

Attn: Georgia  
West One Bank, Oregon  
PO Box 2882  
Portland, Or 97208

10 SECURED PARTY NAME(S) AND SIGNATURE(S)

WEST ONE BANK, OREGON

TYPE NAME(S) OF SECURED PARTY (ES) AS IT APPEARS IN BOX 3 OR 4

Karen Kidder

SIGNATURE(S) OF SECURED PARTY(IES)

Karen Kidder, Loan Operations Supervisor

SIGNATURE(S) OF SECURED PARTY(IES)

12 FILE WITH:

UNIFORM COMMERCIAL CODE  
DEPARTMENT OF LICENSING  
P.O. BOX 9660  
OLYMPIA, WA 98504-8007MAKE CHECKS PAYABLE TO THE  
DEPARTMENT OF LICENSING  
13 FOR OFFICE USE ONLY:Images To  
Be FilledFORM APPROVED FOR USE IN THE  
STATE OF WASHINGTON, R 30 89

112587

PLEASE TYPE FORM - IF AN ERROR IS MADE, CORRECT ALL ERRORS

BOOK 126 PAGE 505

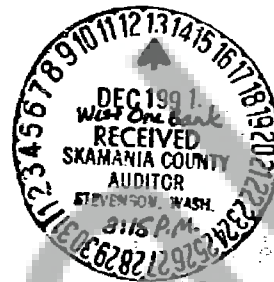
This UCC-3 CHANGE STATEMENT is presented for filing pursuant to the Washington Uniform Commercial Code, chapter 62A.9, Crop Lien Filings, chapter 60.11 and Processor and Preparer Liens chapter 60.13 RCW.

1. DEBTOR(S) (see instruction #2)  
☒ PERSONAL (last, first, middle name and address)  
☐ BUSINESS (legal business name and address)

Kaden, Larry L  
Kaden, Tracy L  
H. Pl. 25 I. Mathews Rd  
Washougal, Wa 98671

Debtor 1  
SSN: \_\_\_\_\_  
FEIN: \_\_\_\_\_  
Debtor 2  
SSN: \_\_\_\_\_  
FEIN: \_\_\_\_\_

## 2. FOR OFFICE USE ONLY - DO NOT WRITE IN THIS BOX



TRADE NAME, DBA, AKA:

## 3. SECURED PARTY(IES) (name and address)

West One Bank, Oregon  
PO Box 2882  
Portland, Or 97208

## 4. ASSIGNEE(S) OF SECURED PARTY(IES) if applicable (name and address)

Registered  
Indexed, Dir  
Indirect  
Filed 12/26/91  
Mailed

5. This change statement effects the original filing statement recorded with the Department of Licensing. List one number and date only. Original filing number 2400A Dated May 2, 1991

6. FEES: A \$7.00 filing fee is required for each action checked in box 7, except termination which requires no fee. If additional sheets are attached for any of the actions, the filing fee for each action shall be \$14.00.  
NUMBER OF ADDITIONAL SHEET(S) ATTACHED: \_\_\_\_\_

## 7. Please check one or more of the following actions:

- ☐ CONTINUATION. The original financing statement between the Debtor(s) and Secured Party(ies), bearing file number shown in box 5, is still effective.  
☐ FULL ASSIGNMENT. All of the Secured Party's rights under the financing statement bearing file number shown in box 5 have been assigned to the Assignee(s) whose name(s) and address(es) appear in box 4.  
☐ PARTIAL ASSIGNMENT. The Secured Party's rights under the financing statement bearing file number shown in box 5, to the property described in box 8, have been assigned to the Assignee(s) whose name(s) and address(es) appear in box 4.  
☐ AMENDMENT. Financing statement bearing file number shown in box 5 is amended as set forth in box 8.  
☐ PARTIAL RELEASE. Secured Party releases the collateral described in box 8 from the financing statement bearing file number shown in box 5.  
☒ TERMINATION. Secured Party(ies) no longer claims a security interest under the financing statement bearing file number shown in box 5.

8. DESCRIPTION of partial assignment, amendment or partial release: (Attach additional 8 1/2" x 11" sheet(s) if needed.)

## 9. DEBTOR NAME(S) AND SIGNATURE(S)

TYPE NAME(S) OF DEBTOR(S) AS IT APPEARS IN BOX 1

SIGNATURE(S) OF DEBTOR(S)

SIGNATURE(S) OF DEBTOR(S)

## 11. RETURN ACKNOWLEDGMENT COPY TO:

Attn: Georgia  
West One Bank, Oregon  
PO Box 2882  
Portland, Or 97208

## 10. SECURED PARTY NAME(S) AND SIGNATURE(S)

WEST ONE BANK, OREGON

TYPE NAME(S) OF SECURED PARTY(IES) AS IT APPEARS IN BOX 3 OR 4

*Karen Kidder*  
SIGNATURE(S) OF SECURED PARTY(IES)  
Karen Kidder, Loan Operations Supervisor

SIGNATURE(S) OF SECURED PARTY(IES)

## 12. FILE WITH:

UNIFORM COMMERCIAL CODE  
DEPARTMENT OF LICENSING  
P.O. BOX 9480  
OLYMPIA, WA 98504-9007

MAKE CHECKS PAYABLE TO THE  
DEPARTMENT OF LICENSING

## 13. FOR OFFICE USE ONLY:

Images To  
Be Filed

FORM APPROVED FOR USE IN THE  
STATE OF WASHINGTON (R/10/89)

WASHINGTON UCC-3

COPY 1 - FILING OFFICE

1-5-20-209