WASHINGTON LEGAL BLANK, INC.

This UCC-1 FINANCING STATEMEN? Is prest terest in the below ramed collateral. Filling fee 97:0 Filling with atta hydra	nt fee \$14.60		BOOK 12/-	PAGE /
DEBTOR(S) (see matruction #2) PERSONAL (last, first middle name and addir ss) Very contract the second se	Debtor 1	2. FOR OFFICE USE C	ONLY - DO NOT WRITE IN THIS BOX	PAGE /
LAIBUSINESS (legal business name and addr 155)	FEIN 91-6001362			
112432	Debtor 2			
Skamania County	SSN			
P.O. Box 790				
Stevenson, WA 98648				
TRADE NAME, DBA, AKA:				
3. SECURE TATY(IES) (name and address)		The state of the s	4 ASSIGNET(S) of SECURED PARTY(IES) of	
		·	(name and accress)	applicable
Waste Equipment Sal	es & Service. Inc			h.
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Portland, OR 972x1				-
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CHECK ONLY IF APPLICABL'2: (For definitions Debtor is a Transmitting Utility Pro		O PRODUCTS OF COLLA	TERAL, see instruction sheet)	
NUMBER OF ADDITIONAL SHEETS PRESENTE	D:			
THIS FINANCING STATEMENT covers the folia	wing collaters'. (Attach addition	al 81/5" x 11" sheetisi if n	eeded.)	
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Seabright Dual Cylinder	Garbage Compactor	L # 10 1	rini a Acord)
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RET JRN ACKNOWLEDGMENT COPY TO: Iname	e and address.		9. PALE WITH:	
	7	-44		
Waste Envisor to a			UNIFORM COMMERCIAL CODE DEPARTMENT OF LICENSING	
Waste Equipment Sa ATTN: Catherine M	Les & Service, Ind	ord	P.O. BOX 9660	
211 N.E. Columbia I	TTUS	- 1	OLYMPIA, WA 98504-8007	
Portland, OR 97211		4.	MAKE CHECKS PAYABLE TO THE DEPARTMENT OF LICENSING	
			10. FOR OFFICE URE ONLY IMAGES TO BE FILMED	
If collateral is described below, this statement m and box 13 if collateral is:	ay be signed by the Secured Pari	ty instead of the Debtor P	Phase check the appropriate box, complete th	e adjacent lines
a dready subject to a security interest in ar or which the debtor's location was change	other jurisdiction when it was been to this state. <i>(complete adjace</i>	rought into this state	1	
 b proceeds of the original collateral describe 	ad ahove in which a converse inse	ent lines and 2)	OPIGILIAL FILING NUMBER	
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c. I listed on a filing which has lapsed. [comp]	eto adjac (A) lines bud 2)	:	3	
d] acquired after a change of name, identification (complete adjacent lines 1, 2 and 3)	or comporate structure of the del	btor(s).	FORMER NAME OF DEBTORIS	S)
DEBTOR NAME(S) AND SIGNATURE(S)	1 1/2/2	13. SECURED PARTY	NAME(S) AND SIGNATURE(S) ARE REQUIRED	
		BEEN COMPLETED).	IF BOX 11 HAS
Skamania County				
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COPY 1 - FILING OFFICE	the Board WASHINGT	UN UCC-1		