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BOOK 162 PAGE 570

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PARTY H. OLSON

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Name ROBERT K. LEICK, Attorney at Law

Address_POB_129_

City/State Stevenson WA 98648

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Document Title(s): (or transactions contained therein) 1. UCC-3 (Change Statement) 2. 3. 4.	First American Title Insurance Company
Reference Number(s) of Documents assigned or released:	
#2436 filed February 1987	7. [47
☐ Additional numbers on page of document	this space for title company use only)

Grantor(s): (Last name first, then first name and initials)

WAYNE L. AMAN and BERNICE M. AMAN, husband and wife (Secured Parties)

4.

5. D Additional names on page ______ of document

Grantee(s): (Last name first, then first name and initials)

1. THOMAS A. ALWAY and SHELLY L. ALWAY, husband and wife (Debtors)

3.

5.

Additional names on page _____ of document

Abbreviated Legal Description as follows: (i.e. lot/block/plat or section/township/range/quarter/quarter)

Furniture & fixtures, trade fixtures, inventory and supplies located in Wayne's Rexall Drug Store, Stevenson WA, being Lots 27 and 28, Block 7, Plat of Stevenson, Skamania County, Washington, tax lot #02-07-01-1-1-3800-00.

Complete legal description is on page ______ of document

Assessor's Property Tax Parcel / Account Number(s):

02-07-01-1-1-3800-00

-NIAL ESTATE EXCISE TAX.

PAID AN SHOW SHIPE FOR 2 1-87

SKIMANIA COUNTY THEASURER

NOTE: The auditor/recorder will rely on the information on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

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PLEASE TYPE FORM. This CHANGE STATEMENT is presented for filing pursuant to the WASHING	TON UNIFORM COMMERC		
LEASE - The terms debtor and secured party are to be construed as LES CONSIGNMENT - The terms debtor and secured party are to be construed.		OR 162 PA	GF 57/
OEBTOR(S) (or assignor(s)) (last name first, and address(es))	FOR OFFICE USE ONLY		
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SHELLY L. ALWAY		· 0	E SX
615 NW Maple Way		<u> </u>	1 m
Stevenson WA 98648		्रस्	
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			5 5
TRADE NAME: (if any) WIND RIVER PHARMACY, INC.		S	77 30 28
SECURED PARTY(IES) (or assignee(s)) (name and address)		4. ASSIGNEE(S) OF THE	CURED PARTITIES)
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WAYNE L. AMAN BERNICE M. AMAN			
POB 766			
Stevenson WA 98648	9 #	46.	- O
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PLEASE TYPE FORM. This CHANGE STATEMENT is presented for filter oursuant to the WACE		
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and secured party are to be co	anstrued as CONSIGNEE and C	CONSIGNOR.
DEBTOR(S) (or assignor(s)) (last name first, and address(es))	2. FOR OFFICE USE ONLY	
THOMAS A. ALWAY		_
SHELLY L. ALWAY	•	·
615 NW Maple Way	1	စု မြို့ မွာ
Stevenson WA 98648	1	
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TRADE NAME: (if any) WIND RIVER PHARMACY, INC.	1	£3
3. SECURED PARTY(IES) (or assignee(s)) (name and address)	<u></u>	<u>6</u>
i de la companya de		4. ASSIGNEE(S) OF SECURED PARTYDES
WAYNE L. AMAN	1 7	(if applicable) (last name first, and address(es))
BERNICE M. AMAN	,	
POB 766	,	
Stevenson WA 98648	,	
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	A The	
7. CONTINUATION. The original financing statement between the for is still effective.		
AMENDMENT. Financing statement bearing file number shown above PARTIAL RELEASE. Secured Party(ies) releases the collateral DESCR RET TERMINATION. Secured Party(ies) no longer claims a security interest OESCRIPTION: Furniture and fixtures, trade fixt Wayne's Rexall Drug Store, Stevens. Plat of Stevenson, Skamania County 8. NUMBER OF ADDITIONAL SHEETS ATTACHED. 9. THOMAS A. ALWAY & SHELLY L. ALWAY, h& TYPE NAME(S) OF DEBIOR(S) (or assignor(s))?	RIBED BELOW from the financing statement under the financing statement tures, inventory son, WA, being Loy WA, being tax I	ing statement bearing file number shown above. ent bearing file number shown above. and supplies located in
(not required)	Mayn	& Chyan
SIGNATURE(S) CF DEBTOR(S) (or assignor(s)) (Required if amendment)	SIGNATURE(S) OF SECU	JRED PARTY(IES) (or assigned(s))
O. RETURN ACKNOWLEDGMENT COPY TO:		
ON NET ORGANIZACIÓN COPY TO	-	St. FILE WITH
BORBAM W VENNAME	7	UNIFORM COMMERCIAL CODE DIVISION
ROBERT K. LEICK, Attorney at Law	1	P.O. BOX 9660
POB 129		CLYMPIA, WA 98504
Stevenson WA 98648	1	OR
		IF FIXTURE FILINGS COUNTY AUDITOR OF COUNTY WALEGO
		COUNTY AUDITOR OF COUNTY WHERE ORIGINAL FILING WAS MADE.
L		
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