



EFS-3

STATE OF OREGON
Corporation Division – U
255 Capitol Street NE, Suite
Salem, OR 97310-1327
(503) 986-2200 Facsimile (503)
FilingInOregon.com

FILED: JUN 24, 2024 12:59 PM
OREGON SECRETARY OF STATE



EFS

LIEN NO. 482481-5

NEIFFER, DUANE A

Statement Of Termination, Continuation, Assignment, Amendment

PLEASE TYPE OR PRINT LEGIBLY. READ INSTRUCTIONS BEFORE FILLING OUT FORM.

A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT NUMBER: 482481

DATE FILED: 09/07/1999

This filing supersedes all previous information associated with this filing number. Please complete this form with all the current information.

B. TYPE OF AMENDMENT (CHECK ALL BOXES THAT APPLY)

LAPSE/TERMINATION (NO FEE). The Secured Party certifies that they no longer claim interest under the financing statement bearing the file number shown in SECTION A.

CONTINUATION. Submitted within six months prior to expiration date.

ASSIGNMENT. The Secured Party assigns to the Assignee whose name and address is shown in SECTION F and bearing the file number shown in SECTION A.

C. NAME(S) OF PERSON(S) SUBJECTING FARM PRODUCTS TO THE SECURITY INTEREST

1. NEIFFER, DUANE A

2. _____

3. _____

D. MAILING ADDRESS

1. PO BOX 257, IONE, OR 97843

2. _____

3. _____

E. SECURED PARTY NAME(S) AND ADDRESS(ES)

1. Bank Of Eastern Oregon, PO BOX 39 HEPPNER, OR 97836

2. _____

3. _____

F. ASSIGNEE NAME AND ADDRESS (If Any)

1. _____

2. _____

3. _____

G. FARM PRODUCT CODE	COUNTY CODE	CROP YEAR (if applicable)	AMOUNT (if applicable)
0201	-	25	-
0204	-	25	-
1001	-	25	-
-	-	-	-
-	-	-	-
-	-	-	-

Debtor

The requirement that a document be signed, authorized or otherwise authenticated by the debtor is satisfied if the debtor has executed a security agreement against a security interest in the farm products to the secured party ORS Ch. 80.115 (7)

Secured Party

FEES
Make check for \$15.00 payable to "Corporation Division."
No fee for Termination

Note: Filing fees may be paid with Visa or MasterCard. The card number and expiration date should be submitted on a separate sheet of paper for your protection.

DO NOT SUBMIT DUPLICATES OF THIS FILING OR ITS ATTACHMENTS

RETURN TO (Please type within the box)

BANK OF EASTERN OREGON
PO BOX 39
HEPPNER, OR 97836