



EFS-3

STATE OF OREGON
Corporation Division
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Salem, OR 9731
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OREGON SECRETARY OF STATE



EFS

LIEN NO. 91571030-1

MASON, SCOTT DONALD

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: 91571030 DATE FILED: 06/06/2018

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.

[X] 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. MASON, SCOTT DONALD

2. MASON, CATHY SUE

3.

Mark One:

If Individual, list last name first.

[] - Business [X] - Individual

[] - Business [X] - Individual

[] - Business [] - Individual

D. MAILING ADDRESS

1. 5370 HARPOLD RD, BONANZA, OR 97623

2. 5370 HARPOLD RD, BONANZA, OR 97623

3.

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

1. UNITED STATE OF AMERICA acting through the Farm Service Agency

2. 1945 MAIN STREET, SUITE 100, KLAMATH FALLS, OR 97601

3.

F. ASSIGNEE NAME AND ADDRESS (If any)

1.

2.

3.

Table with 4 columns: FARM PRODUCT CODE, COUNTY CODE, CROP YEAR (If applicable), AMOUNT (If applicable). Rows include codes 0201, 0203, 0204, 1001 with county 18 and amount ALL.

Debtor

Secured Party

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 Chapter 80.115 (7).

FEES

Make check for \$15.00 payable to "Corporation Division"

Note: Filing fees may be paid with VISA, MasterCard, American Express or Discover card. 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:

FARM SERVICE AGENCY
1945 MAIN STREET, SUITE 100
KLAMATH FALLS, OR 97601