Edgar Filing	: WESTERN AS	SET CLAYN	ORE INFL/	ATION-L	INKE	ED SEC	CURITIES & IN	COME FU	ND - Form 4	
WESTERN Form 4 July 11, 2003	ASSET CLAYM(8	ORE INFLAT	ION-LINKE	ED SECU	RITI	ES & IN	ICOME FUND			
•	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL		
	UNITED		CURITIES A Washington			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no long	ger							Expires:	January 31, 2005	
subject to Section 1 Form 4 o	bject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per			
Form 4 o Form 5	-	suant to Sectio	on 16(a) of th	ne Securit	ies E	xchange	e Act of 1934,	response	0.5	
obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the Publi		ding Con	ipany	Act of	1935 or Section			
(Print or Type I	Responses)									
1. Name and Address of Reporting Person* CASCADE INVESTMENT LLC2. Issuer Name and Ticker or Trading Symbol5. Relationship of Reporting Person(s) to Issuer							on(s) to			
	INFLA HON-LINKED					(Check	k all applicable)			
		SEC [WI	CURITIES & A]	INCOM	E FU	ND	Director Officer (give the below)	itle $X_10\%$ below)	Owner r (specify	
(Month/D				Date of Earliest Transaction Ionth/Day/Year)						
2365 CARI	LLON POINT	07/0	9/2008							
	(Street)		Amendment, D (Month/Day/Yea	-	l		6. Individual or Joi Applicable Line) Form filed by Or			
KIRKLANI	D, WA 98033						Form filed by M _X Form filed by M Person			
(City)	(State)	(Zip)	Fable I - Non-l	Derivative	Secur	ities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Ye	Date, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5)) 5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)		
Common Shares of Beneficial Interest	07/09/2008		Р	33,900	A	\$ 12.567 (1)	4 3,665,700	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships s						
	Director	10% Owner	Officer	Other			
CASCADE INVESTMENT LLC 2365 CARILLON POINT KIRKLAND, WA 98033		Х					
GATES WILLIAM H III ONE MICROSOFT WAY REDMOND, WA 98052		Х					
Signatures							
By: Cascade Investment, L.L.C. B Manager	y: /s/ Mic	hael Larson,	, Busines	SS		07/11/2	2008

Manager	
**Signature of Reporting Person	Date
By: William H Gates III By: /s/ Michael Larson*, Attorney-In-Fact	07/11/2008
<u>**</u> Signature of Reporting Person	Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

This transaction was executed in multiple trades at prices ranging from \$12.54 to \$12.58. The price reported above reflects the
 (1) weighted average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

Remarks:

* Duly authorized under Special Power of Attorney appointing Michael Larson attorney-in-fact, dated February 3, 2006, by an

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.