

INSTRUCTIONS:

16944

UNIFORM COMMERCIAL CODE—FINANCING STATEMENT—FORM UCC-1

STATE OF OREGON

UCC-1 MB2 page 14708 5373

1. PLEASE TYPE THIS FORM. DO NOT FOLD FOR MAILING.
2. Remove Secured Party and Debtor copies and send other 3 copies with interleaved carbon paper intact to the filing officer. Enclose filing fee of \$1.00.
3. When filing is to be with more than one office, Form UCC-2 may be placed over this set to avoid double typing. The Form UCC-1 should be forwarded to the Secretary of State and Form UCC-2 filed with the County Clerk or Recorder, as the case may be.
4. If the space provided for any item(s) on the form is inadequate the item(s) should be continued on additional sheets, preferably 5" x 8" or 8" x 10". Only one copy of such additional sheets need be presented to the filing officer with a set of three copies of the financing statement. Long schedules of collateral, indentures, etc., may be on any size paper that is convenient for the Secured Party.
5. When a copy of the security agreement is used as a financing statement, it is requested that it be accompanied by a completed but unsigned set of these forms, without extra fee.
6. At the time of original filing, filing officer should return third copy as an acknowledgement. At a later time, Secured Party may date and sign termination legend and use third copy as a Termination Statement, or he may use Form UCC-3 as a Termination Statement.

THIS FINANCING STATEMENT is presented to filing officer for filing pursuant to the Uniform Commercial Code.

1A. Debtor(s):

Jozef Sadoski

1B. Mailing Address(es):

4 816 Sumac Ave.
Klamath Falls, OR 97601

2A. Secured Party(ies):

C.P. National Corp.

2B. Address of Secured Party from which security information obtainable
1017 1/2 Main Street PO Box 310
Klamath Falls, OR 97601

3. Maturity Date:
(if any)

Filing Officer (Date, time, number and filing office)

MB2 page 14708

4. This financing statement covers the following types (or items) of property. (If collateral is crops growing or to be grown, or goods which are or are to become fixtures, give description reasonably identifying the real estate.)

One Lennox Pulse gas furnace, model #G14Q3-60 Supplied by
Thomas Sheet Metal per invoice #5480. Installed and attached
to property located at 4816 Sumac Ave., Klamath Falls, OR
Property further described as Lot 11 Block 3, Baynon Park.

5A. Assignee of Secured Party(ies), if any:

5B. Address of Assignee from which security information obtainable:

Check ☒ If covered: ☐ Proceeds of Collateral are also covered.

☐ Products of Collateral are also covered.

Filed with: ☐ SECRETARY OF STATE:

☐ RECORDER

☒ COUNTY CLERK OF Klamath

No. of additional sheets attached

1

By:

Signature(s) of Debtor(s)

C.P. National Corp.

By:

Signature(s) of Secured Party(ies) or Assignee(s)

FILING OFFICER - ALPHABETICAL

STANDARD FORM—UNIFORM COMMERCIAL CODE—FORM UCC-1—Sevens-Ness Law Publishing Co., Portland 4, Ore.

This form of financing statement is approved by the Secretary of State.



CP national

RETAIL INSTALLMENT CONTRACT

147C9

PURCHASER (PRINT) FIRST NAME Jozef		MIDDLE INITIAL	LAST NAME Sadoski	DATE WANTED	DATE OF ORDER	ACCOUNT NUMBER
SPOUSE FIRST NAME		MIDDLE INITIAL	LAST NAME	SHIP TO (If other than Purchaser) SAME		
STREET ADDRESS 4816 Sumac Ave.			APT. NO.	C/O	PHONE NO.	
CITY Klamath Falls	STATE OR	ZIP CODE 97601		STREET ADDRESS		
				CITY	STATE	ZIP CODE

CREDIT APPLICATION ALL APPLICABLE CREDIT INFORMATION MUST BE FILLED IN COMPLETELY AND ACCURATELY.

APPLICATION CREDIT		ALL APPLICABLE CREDIT INFORMATION BE FILLED IN COMPLETELY AND ACCURATELY.		NO. OF DEPENDENT CHILDREN		HOW LONG THIS ADDRESS YRS. MOS.		☐ BUYING ☐ HOUSE ☐ CONDOMINIUM ☐ RENTING ☐ APARTMENT ☐ MOBILE HOME	
☐ HOME PHONE OR ☐ NEAREST () 882-2034		SOCIAL SECURITY NUMBER		NAME		STREET ADDRESS		CITY	
☐ LANDLORD OR ☐ MORTGAGE HOLDER		MONTHLY MORTGAGE OR RENT PAYMENT \$		GIVE ALL PREVIOUS ADDRESSES AND DATES FOR PAST 2 YEARS		GIVE ALL PREVIOUS ADDRESSES AND DATES FOR PAST 2 YEARS		STATE & ZIP CODE	
PURCHASER'S EMPLOYMENT ☐ SELF EMPLOYED (STATE TYPE OF BUSINESS) ☐ EMPLOYED BY		POSITION OR OCCUPATION		INCOME \$		☐ WEEK ☐ MONTH			
STREET ADDRESS		CITY		STATE & ZIP CODE		HOW LONG YRS. MOS.		EMPLOYER'S PHONE	
GIVE ALL PREVIOUS EMPLOYERS AND DATES FOR PAST 2 YEARS		PAY DAYS							
☐ SPOUSE'S ☐ CO-SIGNER'S		EMPLOYER		INSERT DATE OF 4TH BUSINESS DAY FOLLOWING THE DATE OF THIS ORDER		10-26-82			
STREET ADDRESS		CITY		EMPLOYER'S PHONE		POSITION OR OCCUPATION		INCOME \$	
SOURCES OF OTHER INCOME								INCOME \$	
BANK ACCOUNT ☐ CHECKING ☐ SAVING		NAME OF BANK		STREET ADDRESS		CITY			
WHERE DO YOU BORROW OR BUY ON CREDIT? (INCLUDE OPEN ACCOUNTS ON BANK LOANS, FINANCE COMPANIES, CHARGE ACCOUNTS & OTHER INSTALLMENT ACCOUNTS)									
NAME		STREET ADDRESS		CITY & STATE		PRESENT BALANCE		MONTHLY PAYMENT	
1. AUTO LOAN						\$		\$	
2.						\$		\$	
3.						\$		\$	

DESCRIPTION		
Ceiling Insulation	N/A	
Side Wall Insulation	N/A	
Lennox Pulse conversion - per Thomas	N/A	
Sheet Metal Proposal 10/19/82	1,950.00	
	N/A	
	N/A	
	N/A	
	N/A	
	LIST PRICE	1,950.00

TERMS OF SALE

1. LIST PRICE \$ 1950.00

2. SALES TAX \$ -0-

3. SHIPPING & HANDLING \$ -0-

4. CASH PRICE (1+2+3) \$ 1950.00

5. CASH DOWN PAYMENTS

PART A — Paid with order \$ 292.86

PART B — To be paid on delivery (C.O.D.)

Tax \$ -0-

Plus \$ -0- = \$ -0-

6. TOTAL DOWN PAYMENT (PARTS 5A + 5B) \$ 292.86

7. AMOUNT FINANCED (4-6) (UNPAID BALANCE OF CASH PRICE) \$ 1657.14

8. FINANCE CHARGE \$ 382.86

ANNUAL PERCENTAGE RATE 8½ %

9. TOTAL OF PAYMENTS (7 + 8) \$ 2040.00

10. DEFERRED PAYMENT PRICE (4 + 8) \$ 2332.86

PAYABLE IN 60 EQUAL MONTHLY PAYMENTS \$ 34.00 EACH, PLUS A FINAL \$ -0- PAYMENT.

NOTICE TO CUSTOMER: (1) Do not sign this before you read it or if it contains any blank spaces. (2) You are entitled to an exact copy of any agreement you sign. (3) You have the right at any time to pay in advance the unpaid balance due under this agreement and you may be entitled to a partial refund of the finance charge computed as of the installment date nearest the date of prepayment based upon the Rule of 78. No refund of less than \$1.00 will be made. (4) You, the buyer, may cancel this transaction at any time prior to midnight of the fourth business day after the date of this transaction. See the attached notice of cancellation form for an explanation of this right. (5) This contract is also a notice of intent to lien at any time CP national should deem necessary.

FIRST PAYMENT DUE ON OR ABOUT 30 DAYS AFTER DELIVERY AND MONTHLY THEREAFTER.
FINANCE CHARGE APPLIES FROM 30 DAYS PRIOR TO FIRST PAYMENT DUE DATE.

DATE.
Purchaser agrees to pay a delinquency charge of 1 1/4% of the unpaid amount of any installment when any such installment is unpaid for 10 days or more after its due date.

ADDITIONAL TERMS OF CONTRACT ON REVERSE SIDE

(PRINT) SALESMAN'S NAME

ACCEPTED & EXECUTED FOR CP national

BY: B. K. Carlson DATE: 1/21/82
STATE OF OREGON: COUNTY OF KLAMATH ; ss

STATE OF OREGON: COUNTY OF ALAMAIN ;ss
I hereby certify that the within instrument was received and filed for
record on the 5 day of Nov A.D., 19 82 at 10:25 o'clock A M
and duly recorded in Vol 188, of Mtge on page 14708

FEE \$ 8.00

EVELYN BIEHN COUNTY CLERK
by Joyce M. Biehn Deputy

I (we) have read this contract and hereby acknowledge receipt of 2 fully completed copies and 2 detachable notices of cancellation. I (we) warrant that all information supplied are complete and accurate.

Purchaser's
Signature _____
Spouse's
Signature _____
Co-Signer's
Signature _____

Long Sadocke