

INSTRUCTIONS:

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.

3. Maturity Date:
(if any)

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

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

1A. Debtor(s):

Charles White

2A. Secured Party(ies):

C P National

1B. Mailing Address(es):

1316 Summers Lane
Klamath Falls, Or 976012B. Address of Secured Party from which
security information obtainable:1011 Main St - P.O. Box 310
Klamath Falls, Or 97601

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 American Mor-Flo # ESG-51, 50 gallon gas fired
water heater and one American Mor-Flo # ESG-31,
30 gallon gas fired water heater installed and
attached to residence at 1316/1320 Summers Lane,
Klamath Falls, Oregon, Lot 3, Block 4 of Shadow
Hills subdivision, Klamath County, Oregon.

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. No. of additional sheets attached 2

Filed with: ☐ SECRETARY OF STATE: ☐ RECORDER: ☒ COUNTY CLERK OF Klamath COUNTY:

C P National

By

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

See attached sheets

Signature(s) of Debtor(s)

FILLING OFFICER - ALPHABETICAL

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

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

SELLER:



CP national

1011 Main St. - P. O. Box 310
Klamath Falls, Oregon 97601

RETAIL INSTALLMENT CONTRACT

17760

PURCHASER (PRINT) FIRST NAME Charles		MIDDLE INITIAL	LAST NAME White	DATE WANTED ASAP	DATE OF ORDER 11/1/82	ACCOUNT NUMBER
SPOUSE FIRST NAME		MIDDLE INITIAL	LAST NAME	SHIP TO (if other than Purchaser) Same		
STREET ADDRESS 1316 Summers Lane				APT. NO. N/A	C/O	PHONE NO. 884-3772
CITY Klamath Falls, Oregon				STATE	ZIP CODE 97601	
STREET ADDRESS 1320 Summers Lane				CITY Klamath Falls, Oregon	STATE	ZIP CODE 97601

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

<input type="checkbox"/> HOME PHONE OR <input type="checkbox"/> NEAREST	SOCIAL SECURITY NUMBER	NO. OF DEPENDENT CHILDREN	HOW LONG THIS ADDRESS	<input type="checkbox"/> BUYING	<input type="checkbox"/> HOUSE	<input type="checkbox"/> CONDOMINIUM
<input type="checkbox"/> LANDLORD OR <input type="checkbox"/> MORTGAGE HOLDER	NAME		YRS. MOS.	<input type="checkbox"/> RENTING	<input type="checkbox"/> APARTMENT	<input type="checkbox"/> MOBILE HOME
MONTHLY MORTGAGE OR RENT PAYMENT \$			STREET ADDRESS CITY STATE & ZIP CODE			

GIVE ALL PREVIOUS ADDRESSES AND DATES FOR PAST 2 YEARS		POSITION OR OCCUPATION		INCOME \$	<input type="checkbox"/> WEEK <input type="checkbox"/> MONTH
PURCHASER'S EMPLOYMENT	<input type="checkbox"/> SELF EMPLOYED (STATE TYPE OF BUSINESS)				
STREET ADDRESS CITY STATE & ZIP CODE		HOW LONG YRS. MOS.	EMPLOYER'S PHONE	PAY DAYS	
GIVE ALL PREVIOUS EMPLOYERS AND DATES FOR PAST 2 YEARS					

<input type="checkbox"/> SPOUSE'S <input type="checkbox"/> CO-SIGNER'S	EMPLOYER	INSERT DATE OF 4TH BUSINESS DAY FOLLOWING THE DATE OF THIS ORDER → 11/5/82	
STREET ADDRESS CITY		EMPLOYER'S PHONE	POSITION OR OCCUPATION
SOURCES OF OTHER INCOME		INCOME \$	<input type="checkbox"/> WEEK <input type="checkbox"/> MONTH
BANK ACCOUNT <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVING	NAME OF BANK	STREET ADDRESS CITY	INCOME \$ <input type="checkbox"/> WEEK <input type="checkbox"/> MONTH

WHERE DO YOU BORROW OR BUY ON CREDIT? (INCLUDE OPEN ACCOUNTS ON BANK LOANS, FINANCE COMPANIES, CHARGE ACCOUNTS & OTHER INSTALLMENT ACCOUNTS)				
1. AUTO LOAN	NAME	STREET ADDRESS	CITY & STATE	PRESENT BALANCE
2.				\$
3.				\$
				\$

DESCRIPTION			
CEILING INSULATION	New <input type="checkbox"/> Add-On <input type="checkbox"/>		
sq. ft.	R-Value @	per sq. ft.	N/A
SIDEWALL INSULATION			
sq. ft.	R-Value @	per sq. ft.	N/A
One American Mor-Flo, ESG-51, 50 gallon gas			-----
fired Energy-Saver water heater			210.00
Installation as per Baldwin Plumbing bid ...			407.00

LIST PRICE **617.00**

DELIVERY DATE	<input type="checkbox"/> CASH <input type="checkbox"/> 3-PAY
	<input checked="" type="checkbox"/> BUDGET

TERMS OF SALE	
1. LIST PRICE	\$ 617.00
2. SALES TAX	\$ -0-
3. SHIPPING & HANDLING	\$ -0-
4. CASH PRICE (1+2+3)	\$ 617.00
5. CASH DOWN PAYMENTS	
PART A — Paid with order	\$ 137.00
PART B — To be paid on delivery (C.O.D.)	
Tax \$ -0-	
Plus \$ -0- = \$ -0-	
6. TOTAL DOWN PAYMENT (PARTS 5A + 5B)	\$ 137.00
7. AMOUNT FINANCED (4-6) (UNPAID BALANCE OF CASH PRICE)	\$ 480.00
8. FINANCE CHARGE ANNUAL PERCENTAGE RATE -0- %	\$ -0-
9. TOTAL OF PAYMENTS (7 + 8)	\$ 480.00
10. DEFERRED PAYMENT PRICE (4 + 8)	\$ 617.00
PAYABLE IN 48 EQUAL MONTHLY PAYMENTS \$ 10.00 EACH, PLUS A FINAL \$ XXXXXXXXXX PAYMENT.	
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.	
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.	

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.

ADDITIONAL TERMS OF CONTRACT ON REVERSE SIDE

(PRINT) SALESMAN'S NAME

Reed Harris

ACCEPTED & EXECUTED FOR CP national

BY:

DATE:

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

RETAIL INSTALLMENT CONTRACT

17761

SELLER:



CP national

1011 Main St. - P. O. Box 310
Klamath Falls, Oregon 97601

PURCHASER (PRINT) FIRST NAME Charles		MIDDLE INITIAL White		LAST NAME White		DATE WANTED ASAP	DATE OF ORDER 11/1/82	ACCOUNT NUMBER
SHIP TO (If other than Purchaser) Same		PHONE NO. 884-3772		C/O				
STREET ADDRESS 1316 Summers Lane		STATE OR		ZIP CODE 97601				
CITY Klamath Falls, Oregon		STREET ADDRESS		CITY		STATE & ZIP CODE		

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

<input type="checkbox"/> HOME PHONE OR <input type="checkbox"/> NEAREST	SOCIAL SECURITY NUMBER	NO OF DEPENDENT CHILDREN	HOW LONG THIS ADDRESS YRS. MOS.	<input type="checkbox"/> BUYING <input type="checkbox"/> RENTING	<input type="checkbox"/> HOUSE <input type="checkbox"/> APARTMENT	<input type="checkbox"/> CONDOMINIUM <input type="checkbox"/> MOBILE HOME
NAME		STREET ADDRESS		CITY		
<input type="checkbox"/> LANDLORD OR <input type="checkbox"/> MORTGAGE HOLDER	GIVE ALL PREVIOUS ADDRESSES AND DATES FOR PAST 2 YEARS		POSITION OR OCCUPATION	INCOME \$		<input type="checkbox"/> WEEK <input type="checkbox"/> MONTH
MONTHLY MORTGAGE OR RENT PAYMENT \$	STATE & ZIP CODE		HOW LONG YRS. MOS.	EMPLOYER'S PHONE	PAY DAYS	
PURCHASER'S EMPLOYMENT	<input type="checkbox"/> SELF EMPLOYED (STATE TYPE OF BUSINESS)	CITY				
STREET ADDRESS						
GIVE ALL PREVIOUS EMPLOYERS AND DATES FOR PAST 2 YEARS			INSERT DATE OF 4TH BUSINESS DAY FOLLOWING THE DATE OF THIS ORDER → 11/5/82	INCOME \$ <input type="checkbox"/> WEEK <input type="checkbox"/> MONTH		
<input type="checkbox"/> SPOUSE'S <input type="checkbox"/> CO-SIGNER'S	EMPLOYER	CITY	EMPLOYER'S PHONE	POSITION OR OCCUPATION		
STREET ADDRESS		CITY				

SOURCES OF OTHER INCOME		STREET ADDRESS		CITY		
BANK ACCOUNT	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVING	NAME OF BANK				
WHERE DO YOU BORROW OR BUY ON CREDIT? (INCLUDE OPEN ACCOUNTS ON BANK LOANS, FINANCE COMPANIES, CHARGE ACCOUNTS & OTHER INSTALLMENT ACCOUNTS)		STREET ADDRESS	CITY & STATE			
NAME		PRESENT BALANCE	MONTHLY PAYMENT			
1. AUTO LOAN		\$	\$			
2.		\$	\$			
3.		\$	\$			

DESCRIPTION			
	New <input type="checkbox"/> Add-On <input type="checkbox"/>		
CEILING INSULATION	R-Value @ per sq. ft.	N/A	
SIDEWALL INSULATION	R-Value @ per sq. ft.	N/A	
One American Mor-Flo, ESG-31, 30 gallon gas		150.00	
fired Energy-Saver water heater.....		407.00	
Installation as per Baldwin Plumbing bid.....			
LIST PRICE		557.00	

TERMS OF SALE		\$ 557.00
1. LIST PRICE	SALES TAX	\$ -0-
2. SHIPPING & HANDLING		\$ -0-
3. CASH PRICE (1+2+3)		\$ 557.00
4. CASH DOWN PAYMENTS		
PART A - Paid with order	\$ 77.00	
PART B - To be paid on delivery (C.O.D.)		
Tax	\$ -0-	\$ -0-
Plus	\$ -0-	\$ -0-
6. TOTAL DOWN PAYMENT (PARTS 5A + 5B)	\$ 77.00	
7. AMOUNT FINANCED (4-6) (UNPAID BALANCE OF CASH PRICE)	\$ 480.00	
8. FINANCE CHARGE ANNUAL PERCENTAGE RATE -0- %		\$ 480.00
9. TOTAL OF PAYMENTS (7 + 8)	\$ 557.00	
10. DEFERRED PAYMENT PRICE (4 + 8)	\$ 557.00	
PAYABLE IN 48 EQUAL MONTHLY PAYMENTS \$ 10.00 EACH.		
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.		
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.		

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.

ADDITIONAL TERMS OF CONTRACT ON REVERSE SIDE

(PRINT) SALESMAN'S NAME
Reed Harris

ACCEPTED & EXECUTED FOR CP national
BY: **[Signature]** DATE: **11/1/82**

STATE OF OREGON; COUNTY OF KLAMATH; ss
I hereby certify that the within instrument was received and filed for record on the **14** day of **Dec.** A.D., 1982 at **3:08** o'clock **P** M and duly recorded in Vol **M82**, of **Mtge** on page **17759**

EVELYN BIEHN COUNTY CLERK
by **[Signature]** Deputy

FEE \$ **12.00**

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 **[Signature]**
Spouse's Signature
Co-Signer's