

STATE OF OREGON

UNIFORM COMMERCIAL CODE—FINANCING STATEMENT—FORM UCC-1

Vol 1783 Page 1643

INSTRUCTIONS: 20013

1. PLEASE TYPE THIS FORM.
2. Enclose fee of \$3.00 per name listed plus \$2.00 per trade name.
3. This form is to be filed only with the Secretary of State.
4. Send the Alphabetical, Numerical and Acknowledgment copies with interleaved carbon paper intact to the filing officer. The Debtor(s) and Secured Party(ies) are retained by party making the filing.
5. If the space provided for any item(s) on the form is inadequate, the item(s) should be continued on additional sheets, size 5" x 8". Only one copy of such additional sheets need be presented to the filing officer. Long schedules of collateral, indentures, etc. may be on any size paper that is convenient for the secured party.
6. DO NOT STAPLE OR TAPE ANYTHING TO LOWER PORTION OF THIS FORM.
7. At the time of original filing, filing officer will return acknowledgment copy to the assignee if noted on form or secured party. If secured party requires acknowledgment of long schedules of collateral, two copies should be presented and one will be returned.
8. When a copy of the security agreement is used as a financing statement, it is requested that it be accompanied by a completed UCC 21 form. Enclose \$4.00 plus \$3.00 per debtor more than one, and \$2.00 per trade name.
9. When filing is to be terminated the acknowledgment copy may be sent to the filing officer signed by the secured party or assignee or he may use Form UCC 3 as a Termination Statement.

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

1A. Debtor(s):

Mrs. C.M. Cahan

1B. Mailing Address(es):

1712 Winona Way  
Klamath Falls, OR

97601

2A. Secured Party(ies):

C.P. National Corp.

2B. Address of Secured Party from which security information obtainable:

1011 Main Street  
Klamath Falls, OR 97601

Filing Officer Use Only

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3. This financing statement covers the following types (or items) of collateral (ORS 79.4020):

Dennox Pulse Furnace and related instalation, model #GL4Q3-80, instaled in and attached to property located at 1712 Winona Way, Klamath Falls, OR, as per Thomas Sheet Metal bid dated 10/1/82.

4A. Assignee of Secured Party(ies) if any:

4B. Address of Assignee from which security information obtainable:

Check box if products of collateral are also covered ☐

No. of additional sheets attached ☒ 1

C.P. National Corp.

By:

*B. Dawson*

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

\*Signature(s) of Debtor(s) required in most cases.

Signature(s) of Secured Party(ies) in cases covered by ORS 79.4020.

This form of Financing Statement approved by the Secretary of State.

STANDARD FORM—UNIFORM COMMERCIAL CODE—FORM UCC-1

STEVENS-NESS LAW PUBLISHING CO., PORTLAND, OR 97204

FILING OFFICER: ALPHABETICAL

9/4/79

SELLER:



CPnational

RETAIL INSTALLMENT CONTRACT

1644

PURCHASER (PRINT) FIRST NAME <b>ELENORA</b>		MIDDLE INITIAL <b>CAHAN</b>	LAST NAME <b>CAHAN</b>	DATE WANTED	DATE OF ORDER	ACCOUNT NUMBER <b>21-0432-90/07</b>
SPOUSE FIRST NAME		MIDDLE INITIAL	LAST NAME	SHIP TO (If other than Purchaser)		
STREET ADDRESS <b>1712 Winona Way</b>				APT NO	C O	
CITY <b>Klamath Falls</b>				STATE <b>OR</b>	ZIP CODE <b>97601</b>	
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 <b>593882-4282</b>	NO OF DEPENDENT CHILDREN	HOW LONG THIS ADDRESS YRS MOS
<input type="checkbox"/> LANDLORD OR <input type="checkbox"/> MORTGAGE HOLDER	NAME	STREET ADDRESS	CITY
MONTHLY MORTGAGE OR RENT PAYMENT \$	GIVE ALL PREVIOUS ADDRESSES AND DATES FOR PAST 2 YEARS		
PURCHASER'S EMPLOYMENT <input type="checkbox"/> SELF EMPLOYED (STATE TYPE OF BUSINESS)	POSITION OR OCCUPATION	INCOME \$	WEEK MONTH
STREET ADDRESS	CITY	STATE & ZIP CODE	HOW LONG YRS MOS
GIVE ALL PREVIOUS EMPLOYERS AND DATES FOR PAST 2 YEARS			
<input type="checkbox"/> SPOUSE'S EMPLOYER	INSERT DATE OF 4TH BUSINESS DAY FOLLOWING THE DATE OF THIS ORDER → <b>1/24/83</b>	POSITION OR OCCUPATION	INCOME \$
STREET ADDRESS	CITY	EMPLOYER'S PHONE	WEEK MONTH
SOURCES OF OTHER INCOME			
BANK ACCOUNT <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVING	NAME OF BANK	STREET ADDRESS	CITY
WHERE DO YOU BORROW OR BUY ON CREDIT? INCLUDE: OPEN ACCOUNTS ON BANK LOAN; FINANCE COMPANIES; CHARGE ACCOUNTS; OTHER RETAILMENT ACCOUNTS			
1. AUTO LOAN	NAME	STREET ADDRESS	CITY & STATE
2.			
3.			

DESCRIPTION		TERMS OF SALE
Ceiling Insulation	New <input checked="" type="checkbox"/> Add-On <input type="checkbox"/> sq. ft. R-Value per sq. ft.	1. LIST PRICE \$ <b>854.00</b>
Sidewall Insulation	sq. ft. R-Value per sq. ft.	2. SALES TAX \$ <b>0.00</b>
Lennox Pulse Furnace - 80M. BTU	N/A	3. SHIPPING & HANDLING \$ <b>0.00</b>
4 related installation costs as bid	850.00	4. CASH PRICE (1+2+3) \$ <b>854.00</b>
per Thomas Sheet Metal	N/A	5. CASH DOWN PAYMENTS
	N/A	PART A - Paid with order \$ <b>0.00</b>
		PART B - To be paid on delivery (C.O.D.)
		Tax \$ <b>0.00</b>
		Plus \$ <b>0.00</b> = \$ <b>0.00</b>
		6. TOTAL DOWN PAYMENT (PARTS 5A + 5B) \$ <b>0.00</b>
		7. AMOUNT FINANCED (4-6) (UNPAID BALANCE OF CASH PRICE) \$ <b>854.00</b>
		8. FINANCE CHARGE ANNUAL PERCENTAGE RATE <b>8 1/2%</b> \$ <b>116.30</b>
		9. TOTAL OF PAYMENTS (7 + 8) \$ <b>970.30</b>
		10. DEFERRED PAYMENT PRICE (4 + 8) \$ <b>970.30</b>
		PAYABLE IN <b>36</b> EQUAL MONTHLY PAYMENTS \$ <b>26.95</b> EACH, PLUS A FINAL \$ <b>0.00</b> 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.

DELIVERY DATE <b>1/18/83</b>	CASH <input type="checkbox"/> 3-PAY <input type="checkbox"/> BUDGET <input checked="" type="checkbox"/>
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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

*Kris Rawson*  
ACCEPTED & EXECUTED FOR CP national

BY: *[Signature]* DATE: **1/18/83**

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 is complete and accurate.

Purchaser's Signature *Mrs. E M Cahan*  
Spouse's Signature  
Co-Signer's

STATE OF OREGON: COUNTY OF KLAMATH :ss

I hereby certify that the within instrument was received and filed for record on the 31 day of Jan A.D., 1983 at 2:16 o'clock P M, and duly recorded in Vol M83, of Mtge on page 1643

EVELYN BIEHN COUNTY CLERK

by *[Signature]* DeputyFee \$ 8.00