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STATE OF OR		IM COMMERCIAL C	ODE F	INANCING STATEMENT	
A:= 0 7 G 2 D 2		ROPERTY - FOII R COUNTY FILING		11 V	
MTC 35309					
Ins EINANCING STATEMEN 1A. Deblor Name(s):	2A. Sec	ured Party Name(s):		Orm Commercial Code: A Assignee of Secured Party	
Ralph A. Dill Terri L. Dill	West	: One Bank			
18. Debtor Mailing Address(es): 1515 El Dorado		ress of Secured Party fro	m which security 48	. Address of Assignee:	
Klamathe Falls	, OR 234	SW Broadway			
		Box 2882 land, OR 97	7208		
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3. This linancing statement covers the	following types (or items)	of property (check if app	icatio): Discovery	, _{d40} 00 spa	
The goods are to become fixt	ures on: 6/21/9	ז 🛄 ד	he above timber is stand	ding on:	
The above minerals or the lik real estate) All Of Lo	e (including gas and oil) or ot 16 and the Sou	accounts will be finance theasterly One	dat the wellhead or min half of lot l	ehead of the well or mine loc 5 in Block 8 Hills	aled on: (de: side
Addition to t	he city Ot klama:	th falls, acco	rding to the o	fficial plat there	eof
and the financing statement i	e office of the o stobefiled for record in th	e real estate records. (If	KLAMATH COUNT the debtor does not have	y, Oregon e an interest of record) The n	name of a red
owner is:		N. 1			
Check box if products of colle Debtor hereby authorizes the Secured	Party to record a carbon, j		r of attached additional a roduction of this form, fi		v agreement
inancing statement under ORS Chapt Signature of the debtor required in mo	er 79. st cases. By:	×Ra	Dil	•	,
Signature(s) of Secured Party in cases ORS 79.4020	covered by	x Je	WIRK)	100	
			Required signature(s)		
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STATE OF OREGON: COUNTY OF KLAMATH: ss.

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