STATE OF OREGON FINANCING STATEMENT STANDARD FO	なり DBM HCC・1	Vol	79≤ Page 33
PLEASETYPE CUSTOM			
READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM. NUMBER		SSX	
		line.	
A. Check (x) one: DEBTOR NAME, CONSIGNEE, LESSEE	Social Sec. number or TIN		
(H Individual list last name first) Fred A. Hobson	5/0 // 0/40		
	540-44-3408		
Ellen M. Hobson	542-82-6895		
(Last Name) (First Name) (Middle) EBTOR MAILING ADDRESS:			
PO Box 1859	Total Debtor Names:		
LaPine Or 97739			
Check (x) one: SECURED PARTY, CONSIGNOR, LESSOR	C ASSIGNED NAME	Rese E AND ADDRESS (if any	rved for Filing Officer Use
NAME AND ADDRESS (from which security information is obtainable)			
Vinyl Window Sales, Inc.	Fred Ha	11 32nd St.	
1810-H SE 1st St.	Redmond		
Redmond, OR 97756	redmond.	, OK 3//JU	
Telephone Number:	Telephone f	lumber:	
This financing statement covers the following types (or items) of collateral (if Mobile home "X" 105013	ORS 79.4020)	Total	number of attachments:
Serial: 114949	in territoria di Albanda di Arr Nomenta di Arra di Arra	ties in e	
1960 BUCKINGHAM			
1760 DUCKINGHAIN			
		34 T	
The second secon			
Check (x) if covered: PROCEEDS of collateral are also covered		collateral are also covere	d
DEBTOR'S SIGNATURE NOT REQUIRED. This statement is filed without the listeral (if applicable check box): (1) ☐ collateral already subject to a securoceeds of the described original collateral which was perfected; (3) ☐ Collateral acquired after " change of name identity or corporate situations of the collateral acquired after " change of name identity or corporate situations of the collateral acquired after " change of name identity or corporate situations of the collateral acquired after " change of the collateral acquired after a collateral acquired acqui	rity interest in another jurise	ct a security interest in diction; (2) Which is a has lapsed; or (4)	F. DEBTOR IS A TRANSMITTING UTILITY (ORS 79.4010)
ollateral acquired after ochange of name, identity or corporate structure of delibtor hereby authorizes the Secured Party (or Consignor or Lessor) to file a creement as a finapping statement under ORS Chanter 79			1
reement as a financing statement under ORS Chapter 79.	_	or representatives and to	The manding statement of securi
By: Har A Groben	 200	by M.D	obsor
Requi	red Signature(s)		2000
Use the following spaces only for Farm Produc	ts requiring Effective Finan	cing Statement (EFS) fil	Ing.
FARM PRODUCTS EFFECTIVE F	INANCING STATE	MENT FORM EFS	-1
IS FARM PRODUCT EFFECTIVE FINANCING STATEMENTS	Tent		ment remains effective for a perio
	as provided for by One Cik	1988-79.	
(if applicable)	(if apparcable) DESCRIPTIO	N/LOCATION (if applicable)	
			and the second s
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
<u> </u>			
			No. of the State o
Statement requires signature of debtor(s) and secured party(les).			ource of Payment:
Due 1		· · · · · ·	Cash
Ву:	Signature of Secured Party	··.	Check #
By:			
	ogradu or coccada Party	1.3	Visa/MasterCard □
Signature of Debtor(s)			Visa/MasterCard (see instruction 8-D on
			Visa/MasterCard (see instruction 8-D on reverse of Original copy)
Signature of Debtor(s) RETURN ACKNOWLEDGEMENT COPY TO: (name and a		S	(see instruction 8-D on reverse of Original copy) ubmit completed form to:
Signature of Debtor(s) RETURN ACKNOWLEDGEMENT COPY TO: (name and a Vinyl Siding Sales, Inc		S S C	(see instruction 8-D on reverse of Original copy) ubmit completed form to: scretary of State, UCC Section apitol Bidg., Room 41
Signature of Debtor(s) RETURN ACKNOWLEDGEMENT COPY TO: (name and a Vinyl Siding Sales, Inc 1810 SE 1st St Suite H		\$ \$ \$ \$ \$ \$ \$ \$	(see instruction 8-D on reverse of Original copy) ubmit completed form to: secretary of State, UCC Section aptitol Bidg., Room 41 slem, OR 97310
Signature of Debtor(s) RETURN ACKNOWLEDGEMENT COPY TO: (name and a Vinyl Siding Sales, Inc.		\$ \$ \$ \$ \$ \$	(see instruction 8-D on reverse of Original copy) ubmit completed form to: scretary of State, UCC Section apitol Bidg., Room 41
Signature of Debtor(s) RETURN ACKNOWLEDGEMENT COPY TO: (name and a Vinyl Siding Sales, Inc 1810 SE 1st St Suite H		\$ \$ \$ \$ \$ \$	(see instruction 8-D on reverse of Original copy) ubmit completed form to: scretary of State, UCC Section apitol Bidg., Room 41 alem, OR 97310 03) 378-4146
Vinyl Siding Sales, Inc 1810 SE 1st St Suite H Redmond, Oregon 97756		\$ \$ \$ \$ \$ \$	(see instruction 8-D on reverse of Original copy) ubmit completed form to: scretary of State, UCC Section apitol Bidg., Room 41 alem, OR 97310 03) 378-4146
Signature of Debtor(s) RETURN ACKNOWLEDGEMENT COPY TO: (name and a Vinyl Siding Sales, Inc 1810 SE 1st St Suite H Redmond, Oregon 97756 EATE OF OREGON: COUNTY OF KLAMATH: SS.	iddress)	\$ \$ \$ \$ \$ \$	(see instruction 8-D on reverse of Original copy) ubmit completed form to: ecretary of State, UCC Section apttol Bidg., Room 41 alem, OR 97310 03) 378-4145 UX (503) 373-1166
Signature of Debtor(s) RETURN ACKNOWLEDGEMENT COPY TO: (name and s Vinyl Siding Sales, Inc 1810 SE 1st St Suite H Redmond, Oregon 97756 EATE OF OREGON: COUNTY OF KLAMATH: SS.	tle Company	9 9 9 9 9	(see instruction 8-D on reverse of Original copy) ubmit completed form to: ecretary of State, UCC Section apitol Bidg., Room 41 alem, OR 97310 03) 378-4148 VX (503) 373-1168
Vinyl Siding Sales, Inc 1810 SE 1st St Suite H Redmond, Oregon 97756 PATE OF OREGON: COUNTY OF KLAMATH: 55. Red for record at request of	tle Company 3_o'clock_A	s S C S S S S S S S S S S S S S S S S S	(see instruction 8-D on reverse of Original copy) ubmit completed form to: secretary of State, UCC Section apttol Bidg., Room 41 alem, OR 97310 03) 378-4146 NX (503) 373-1166
Signature of Debtor(s) RETURN ACKNOWLEDGEMENT COPY TO: (name and s Vinyl Siding Sales, Inc 1810 SE 1st St Suite H Redmond, Oregon 97756 EATE OF OREGON: COUNTY OF KLAMATH: SS.	tle Company	M., and duly reconge 33216	(see instruction 8-D on reverse of Original copy) ubmit completed form to: ecretary of State, UCC Section apitol Bidg., Room 41 alem, OR 97310 03) 378-4148 UX (503) 373-1168 he
Vinyl Siding Sales, Inc 1810 SE 1st St Suite H Redmond, Oregon 97756 ATE OF OREGON: COUNTY OF KLAMATH: ss. ed for record at request of	tle Company 3_o'clock_A	M., and duly reconge 33216	(see instruction 8-D on reverse of Original copy) ubmit completed form to: acretary of State, UCC Section apitol Bidg., Room 41 alem, OR 97310 039 378-4145 UX (503) 373-1166 he 5th ded in Vol M95