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STATE OF OREGON
Corporation Division - UCC
Public Service Building
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(503) 986-2200 Facsimile (503) 373-1166

THIS SPACE FOR OFFICE USE ONLY

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STATE FINANCING STATEMENT STANDARD FORM

PLEASE TYPE OR WRITE LEGIBLY. READ INSTRUCTIONS BEFORE FILLING OUT FORM.

This Financing Statement is presented to filing officer pursuant to the Uniform Commercial Code. This financing statement remains effective for a period of five years from the date of filing, unless extended for additional periods as provided for by ORS Chapter 79. A carbon, photographic or other reproduction of this form, financing statement or security agreement may be filed as a financing statement under ORS Chapter 79.

A. DEBTOR NAME(S) (if individual list last name first)

1. JAMKELLY, INC

2.

3.

DEBTOR MAILING ADDRESS:
1720 Streamside Court
Missoula MT 59808

B. SECURED PARTY(IES) NAME AND ADDRESS

General Electric Business Asset Funding Corporation
PO Box C-97550
Attn: Franchise Finance
Bellevue WA 98009

Contact Name: J. Liversidge

Phone No. 425-450-3976

C. ASSIGNEE(S) NAME AND ADDRESS (if any)

Contact Name:

Phone No.:

D. DEBTOR SIGNATURE(S) REQUIRED:

Per attached Exhibit "A"
James W. Kelly, President

By:

By:

By:

By:

E. DEBTOR SIGNATURE(S) NOT REQUIRED. If applicable, check the appropriate box below to file without debtor signature(s). This statement is filed without the debtor signature(s) to perfect a security interest in collateral. Secured Party must sign, when Debtor signature(s) is not required. See instructions for further information.

- ☐ Collateral already subject to a security interest in another jurisdiction.
- ☐ Which is proceeds of the described original collateral which was perfected.
- ☐ Collateral as to which the filing has lapsed.
- ☐ Collateral acquired after a change of name, identity or corporate structure of debtor.

By:

Secured Party signature

Secured Party signature

RETURN COPY TO: (name and address). Please do not type or print outside of bracketed area. OR FAX COPY TO: (name and fax numbers).

General Electric Business Asset Funding Corp.
PO Box C-97550
Attn: Franchise Finance
Bellevue, WA 98009

Name J. Liversidge

Fax Number: 425-450-3991

UCC-1 (Rev. 7/95)

DEBTOR