1999 JUN 30 PH 3: 05

STATE OF OREGON Corporation Division - UCC Public Service Building 255 Capitol Street NE, Suite 151 Salem, OR 97310-1327 (503) 936-2200 Facsimile (503) 373-1166 THIS SPACE FOR OFFICE USE ONLY

26191

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UCC-1

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 uncler ORS Chapter 79.

A. DEBTOR NAME(S) (if individual list last name first)	F. LIST THE TYPES (OR ITEMS) OF
1. DONALD HARLEY CARTER, A.K.A. DONALD H. CARTE	COLLATERAL (CRS 79.4020).
	PRODUCTS of collateral are also covered.
2. DON CARTER	
	RECORD OWNER:
3	Donald Harley of pritt-carter
DEBTOR MAILING ADDRESS:	Entry of the debtor in the
	commercial registry and the
5215 Peggy ave	following property;
Klamath Falls Or.	Tract 36, NEW DEAL TRACTS, in
97601	the County of Klamath, State
	of Oregon. Code 41 Map 3809-
	35cc TL 6100.
	Califorina certificate# 9738
B. SECURED PARTY(IES) NAME AND ADDRESS	file # 64-151338 and
	Treasury Direct Account #
Donald Harley of pritt-carter	Z 256 254302
2795 Anderson Ave. #13	and all other property of the
Klamath Falls Or. 97603	debtor, all products, proceeds
E.I.N. 545-67-7113	fixtures, accounts, tangables
Contact Name: Phone No.:(541)273-099	and intangables.
C.ASSIGNEE(S) NAME AND ADDRESS (if any)	all property is accepted for
	value and exempt from levy
	adjustment of this filling
	is from public policy HJR-192
	and ucc-10-104
Contest Nove	All products, accounts, and
Contact Name Phone No.:	fixtures and the orders there
D. DEBTOR SIGNATURE(S) REQUIRED:	from are released to the
A 20 0	debtor.
By: 2 good Host Cato By: Don't the little	
of the production of the state	
Ву: Ву:	
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,	
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.	
	State of Oregon, County of Klamath
Collateral already subject to a security interest in another jurisdiction.	Recorded 6/30/99, at <u>3:05 p. </u> m.
☐ Which is proceeds of the described original collateral which was perfected. ☐ Collateral as to which the filling has lapsed.	In Vol. M99 Page <u> </u>
Collateral acquired after a change of name, identity or corporate structure of debtor.	Linda Smith,
By: Obtained alter a change of name, identity of corporate structure of debtor.	County Clerk Fee\$ 5 KP
- ST4. 0.10 - C-	
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 number).

153 WENDLING ITCAMATH FALLS, CR MART

Name: <u>CARTER DISTRIBUTION</u> Fax Number (541) 882-8642

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