

'02 MAY 15 PM 4:03

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State of Oregon, County of Klamath

Recorded 05/15/2002 4:03 p.m.

Vol M02, Pg 29167-69

Linda Smith, County Clerk

Fee \$ 31.00 # of Pgs 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Northwest Farm Credit Services, PCA
900 Klamath Avenue
PO Box 148
Klamath Falls, OR 97601

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

Blackman Land Co.

OR 1b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

1c. MAILING ADDRESS

7103 Turner Ct.

CITY

Klamath Falls

STATE

OR

POSTAL CODE

97603

COUNTRY

USA

1d. TAX ID #: SSN OR EIN

93-0807691

ADD'L INFO RE

ORGANIZATION

DEBTOR

1e. TYPE OF ORGANIZATION

Partnership

1f. JURISDICTION OF ORGANIZATION

OR

1g. ORGANIZATIONAL ID #, if any

OR218964-85

☐ NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR 2b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

2d. TAX ID #: SSN OR EIN

ADD'L INFO RE

ORGANIZATION

DEBTOR

2e. TYPE OF ORGANIZATION

2f. JURISDICTION OF ORGANIZATION

2g. ORGANIZATIONAL ID #, if any

☐ NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME

Northwest Farm Credit Services, PCA

OR 3b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

3c. MAILING ADDRESS

PO Box 148

CITY

Klamath Falls

STATE

OR

POSTAL CODE

97601

COUNTRY

USA

4. This FINANCING STATEMENT covers the following collateral:

All now owned or hereafter acquired collateral described herein, including, without limitation the types or items of collateral described herein and inventory, accounts, general intangibles, and products and proceeds of collateral, and including:

See attached Schedule A.

5. ALTERNATIVE DESIGNATION (if applicable)	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS	Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	All Debtors	Debtor 1	Debtor 2	
8. OPTIONAL FILER REFERENCE DATA						

Financing Statement (44430-141)

31✓

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1A OR 1B) ON RELATED FINANCING STATEMENT**9a. ORGANIZATION'S NAME**

Blackman Land Co.

OR 9b. INDIVIDUAL'S LAST NAME**FIRST NAME****MIDDLE NAME, SUFFIX****10. MISCELLANEOUS:**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only org name (11a or 11b) - do not abbreviate or combine names**11a. ORGANIZATION'S NAME****OR 11b. INDIVIDUAL'S LAST NAME****FIRST NAME****MIDDLE NAME****SUFFIX****11c. MAILING ADDRESS****CITY****STATE****POSTAL CODE****COUNTRY****11d. TAX ID #: SSN OR EIN****ADD'L INFO RE
ORGANIZATION
DEBTOR****11e. TYPE OF ORGANIZATION****11f. JURISDICTION OF ORGANIZATION****11g. ORGANIZATIONAL ID #, if any**☐ NONE**12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - Insert only org name (12a or 12b)****12a. ORGANIZATION'S NAME****OR 12b. INDIVIDUAL'S LAST NAME****FIRST NAME****MIDDLE NAME****SUFFIX****12c. MAILING ADDRESS****CITY****STATE****POSTAL CODE****COUNTRY**

USA

13. This FINANCING STATEMENT covers ☐ **timber to be cut or** ☐ **as extracted**collateral, or is filed as a ☒ **fixture filing****14. Description of real estate:****See attached Schedule A.****15. Name and address of a RECORD OWNER of above-described real estate
(if Debtor does not have a record interest):****16. Additional collateral description.****17. Check only if applicable and check only one box.**Debtor is a ☐ **Trust** or ☐ **Trustee acting with respect to property held in trust** or ☐ **Decedent's Estate****18. Check only if applicable and check only one box.**☐ **Debtor is a TRANSMITTING UTILITY**☐ **Filed in connection with a Manufactured-Home Transaction - effective 30 years**☐ **Filed in connection with a Public-Finance Transaction - effective 30 years**

FIXTURES:

All irrigation equipment located off mortgaged property and located on property described as follows:

SW1/4NW1/4SW1/4 of Section 20, Township 39 South, Range 10 East, W.M., Klamath County, OR.

DEBTOR(S) SIGNATURES:

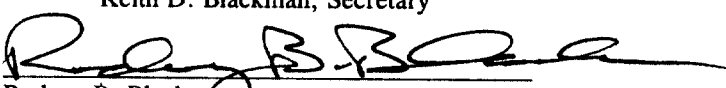
Blackman Farms, Inc.

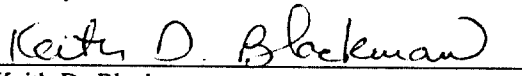
By: 

Rodney B. Blackman, President

Attest: 

Keith D. Blackman, Secretary


Rodney B. Blackman


Keith D. Blackman

SECURED PARTY SIGNATURE:

Northwest Farm Credit Services, PCA

By: 

Authorized Agent