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State of Oregon, County of Klamath
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Linda Smith, County Clerk
Fee \$ 21.00 # of Pgs 1

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional) Mindy Tuter, 541-850-7500	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) NORTHWEST FARM CREDIT SERVICES 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			
OR			
1b. INDIVIDUAL'S LAST NAME Valladao		FIRST NAME Robert	MIDDLE NAME A
1c. MAILING ADDRESS PO Box 321		CITY Bly	STATE OR
1d. Tax Id#: SSN or EIN 547-50-0229		1e. TYPE OF ORGANIZATION ADD'L INFO RE ORGANIZATION DEBTOR	1f. JURISDICTION OF ORGANIZATION OR 97622
		1g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> 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 Valladao		FIRST NAME Roberta	MIDDLE NAME E
2c. MAILING ADDRESS PO Box 321		CITY Bly	STATE OR
2d. Tax Id#: SSN or EIN 570-98-3998		2e. TYPE OF ORGANIZATION ADD'L INFO RE ORGANIZATION DEBTOR	2f. JURISDICTION OF ORGANIZATION OR 97622
		2g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> 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, FLCA			
OR			
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME
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.

All timber or proceeds from timber cut or to be cut, together with all accounts, general intangibles and any proceeds arising under any sale and affecting property legally described as: Township 36 South, Range 14 East, Willamette Meridian, Section 32 NE1/4NE1/4, County of Klamath, State of Oregon.

5. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> LESSEE/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG LIEN <input type="checkbox"/> NON-UCC FILING			
6. <input 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] <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA			

Robert A. Valladao CIF #1484-302