

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Jami Mueller 800-648-8026	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) <div style="border: 1px solid black; padding: 5px;"> Diversified Financial Services, LLC 14010 First National Bank Parkwy, Ste. #205 Omaha, NE 68154 </div>	

State of Oregon, County of Klamath

Recorded 02/11/2003 8:56 a m.Vol M03 Pg 08233-35

Linda Smith, County Clerk

Fee \$ 3.00 # of Pgs 3*100 opa*

'03 FEB 11 AM 8:56

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 BRIGGS	FIRST NAME VINCENT	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS PO BOX 683		CITY CHILOQUIN	STATE OR
		POSTAL CODE 97624	COUNTRY
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION
		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 BRIGGS	FIRST NAME JANICE	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS PO BOX 683		CITY CHILOQUIN	STATE OR
		POSTAL CODE 97624	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	
		<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 DIVERSIFIED FINANCIAL SERVICES, LLC			
OR			
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 14010 FIRST NATIONAL BANK PKWY, STE. #205		CITY OMAHA	STATE NE
		POSTAL CODE 68154	COUNTRY

4. This FINANCING STATEMENT covers the following collateral:

1-NEW MODEL 8000 VALLEY IRRIGATION PIVOT 936' W/VALLEY SUPPLIED ACC., FREIGHT & INSTALLATION (NON-TOWABLE)
 2300' CABLECON WIRE & MISC.

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) [OPTIONAL FEE] [optional]		All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2 <input type="checkbox"/>			
8. OPTIONAL FILER REFERENCE DATA 9381801						

08234

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

OR

9b. INDIVIDUAL'S LAST NAME

BRIGGS

FIRST NAME

VINCENT

MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one 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 one 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

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 EXHIBIT "A"
KLAMATH COUNTY, ORPARCEL NUMBERS: 3407-1100-2000,
3407-1100-2001, 3407-1400-500, &
3407-1400-60015. Name and address of a RECORD OWNER of above-described real estate
(if Debtor does not have a record interest):

VINCENT BRIGGS

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 Estate18. 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

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 07/29/98)

FORM SHOULD BE TYPEWRITTEN OR COMPUTER GENERATED

3304

3304

EXHIBIT "A"

08235

PARCEL 1:

Township 34 South, Range 7 East of the Willamette Meridian, in the County of Klamath, State of Oregon:

Section 11: The SE 1/4 SW 1/4 EXCEPTING a tract of land more particularly described as follows:

Beginning at Northwest corner of said SE 1/4 of the SW 1/4; thence East 640 feet; thence South 800 feet; thence West 640 feet; thence North 800 feet to the point of beginning.

ALSO the SW 1/4 SE 1/4 and the W 1/2 SE 1/4 SE 1/4, EXCEPT THEREFROM the East 394 feet.

Section 14: The N 1/2 NE 1/4 NW 1/4, The N 1/2 S 1/2 NE 1/4 NW 1/4, THE N 1/2 NW 1/4 NE 1/4, The N 1/2 S 1/2 NW 1/4 NE 1/4, The N 1/2 W 1/2 NE 1/4 NE 1/4. EXCEPT THEREFROM the East 394 feet, and the N 1/2 S 1/2 W 1/2 NE 1/4 NE 1/4 EXCEPT THEREFROM the East 394 feet.