

State of Oregon, County of Klamath  
Recorded 04/28/2003 3:16 p m.  
Vol M03 Pg 27317-18  
Linda Smith, County Clerk  
Fee \$ 26<sup>00</sup> # of Pgs 2

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
 ROWENA A. CHASE (541) 883-6924 EXT. 108

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

OC  
 USDA/FARM SERVICE AGENCY  
 2316 SOUTH SIXTH STREET  
 SUITE C  
 KLAMATH FALLS, OREGON 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  
 RANDALL

FIRST NAME  
 ROBERT

MIDDLE NAME  
 LOUIS

SUFFIX

1c. MAILING ADDRESS  
 45859 GERBER ROAD

CITY  
 BONANZA

STATE  
 OR

POSTAL CODE  
 97623

COUNTRY  
 USA

1d. ADD'L INFO RE ORGANIZATION DEBTOR

1e. TYPE OF ORGANIZATION

1f. JURISDICTION OF ORGANIZATION

1g. ORGANIZATIONAL ID #, if any

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  
 RANDALL

FIRST NAME  
 JULIE

MIDDLE NAME  
 ANN

SUFFIX

2c. MAILING ADDRESS  
 45859 GERBER ROAD

CITY  
 BONANZA

STATE  
 OR

POSTAL CODE  
 97623

COUNTRY  
 USA

2d. 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  
 UNITED STATES OF AMERICA acting through FARM SERVICE AGENCY

OR

3b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

3c. MAILING ADDRESS  
 2316 SOUTH 6TH STREET, SUITE C

CITY  
 KLAMATH FALLS

STATE  
 OR

POSTAL CODE  
 97601

COUNTRY  
 USA

4. This FINANCING STATEMENT covers the following collateral:

1. All crops, livestock, farm products, equip, cert. of titles, goods, supplies, inventory, accounts, deposit accounts, supporting obligations, contract rights, payment intangibles, general intangibles, investment property, gross receipts, equities, revolving funds, crop insurance indemnity payments, and all entitlements, benefits, and payments from all State and Federal farm products;
2. 15 HP Pump, Fairbanks, Morse; SN#365774;
3. All proceeds, products, accessions, and security acquired hereafter.

DISPOSITION OF COLLATERAL IS NOT HEREBY AUTHORIZED

Robert L. Randall  
 ROBERT L. RANDALL

Julie Randall  
 JULIE RANDALL

5. ALTERNATIVE DESIGNATION (if applicable):  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOBR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

6.  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)

7. See Instruction Debtor(s)

8. OPTIONAL FILER REFERENCE DATA  
USA acting through Farm Service Agency by: Rowena Chase

26-

**UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS (front back) CAREFULLY

**9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT**

9a. ORGANIZATION'S NAME		
OR		
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX
RANDALL	ROBERT	L.

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11 b) - 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. TAXID#: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION
			11g. ORGANIZATIONAL ID#, if any

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:  
 Gov't lots 3 & 4, & the SE1/4, SW1/4 Sec 18, T40S  
 R 14 E W M.  
 45805 Gilt Rd.  
 - Bonanza, Or 97623

16. Additional collateral description:

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

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