M05-66005

Klamath County, Oregon 10/07/2005 08:38:27 AM

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CC FINANCING	- 				
	(front and back) CAREFULLY				
CRYSTAL D.	NTACT AT FILER [optional] JOHNSON (402) 462-412	98			
	ENT TO: (Name and Address)				
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0k) T-1	L CREDIT COMPANY				
N V	. BOX 1386				
HAS	STINGS, NE 68902				
		ji .			
		THE ABOVE	SPACE IS FO	R FILING OFFICE US	E ONLY
	LEGAL NAME - insert only <u>one</u> debtor name (1a or 1	o) - do not abbreviate or combine names			
1a. ORGANIZATION'S NAM	5				
16. INDIVIDUAL'S LAST NAM	I.	Libot	1		1
I I INDIVIDUAL STAST NAM	7C	FIRST NAME	MIDDLE NAME		SUFFIX
CHIEVANIC		HENRY	C. G		
CHEYNE MAILING ADDRESS					
MAILING ADDRESS	CII VALLEV DD	CITY	STATE	POSTAL CODE	
mailing address 9961 E. LANG	ELL VALLEY RD. ADDI INFO RE 11e TYPE OF ORGANIZATION	BONANZA	STATE OR	97623	USA
MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION	CITY	STATE OR	POSTAL CODE	USA
MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS 42-96-9862	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	BONANZA 11. JURISDICTION OF ORGANIZATION	OR 1g. ORGA	97623	
MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS 42-96-9862	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 1	BONANZA 11. JURISDICTION OF ORGANIZATION	OR 1g. ORGA	97623	USA
MAILING ADDRESS 9961 E. LANG SEE INSTRUCTIONS 42-96-9862 ADDITIONAL DEBTOR'S 2a. ORGANIZATION'S NAM	ADD'L INFO RE 1.6. TYPE OF ORGANIZATION ORGANIZATION DEBTOR S EXACT FULL LEGAL NAME - insert only one	BONANZA 11. JURISDICTION OF ORGANIZATION	OR 1g. ORGA	97623	USA
MAILING ADDRESS 9961 E. LANG SEE INSTRUCTIONS 42-96-9862 ADDITIONAL DEBTOR'S 2a. ORGANIZATION'S NAM	ADD'L INFO RE 1.6. TYPE OF ORGANIZATION ORGANIZATION DEBTOR S EXACT FULL LEGAL NAME - insert only one	BONANZA 11. JURISDICTION OF ORGANIZATION	OR 1g. ORGA	POSTAL CODE 97623 ANIZATIONAL ID #, if any	USA
MAILING ADDRESS 9961 E. LANG SEGINSTRUCTIONS 42-96-9862 ADDITIONAL DEBTOR'S 2a. ORGANIZATION'S NAM 2b. INDIVIDUAL'S LAST NA CHEYNE	ADD'L INFO RE 1.6. TYPE OF ORGANIZATION ORGANIZATION DEBTOR S EXACT FULL LEGAL NAME - insert only one	BONANZA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CHERIE	STATE OR 1g. ORGA inne names MIDDLE I J. C.	POSTAL CODE 97623 ANIZATIONAL ID #, if any	USA
MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS 42-96-9862 ADDITIONAL DEBTOR'S 2a. ORGANIZATION'S NAM CHEYNE MAILING ADDRESS	ADD'L INFO RE 16. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 5 EXACT FULL LEGAL NAME - insert only one E	DONANZA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CHERIE CITY	STATE OR 1g. ORGA ine names MIDDLE I J. C. STATE	POSTAL CODE 97623 ANIZATIONAL ID #, if any NAME POSTAL CODE	SUFFIX
MAILING ADDRESS 9961 E. LANG SEE INSTRUCTIONS 12-96-9862 ADDITIONAL DEBTOR'S 2a. ORGANIZATION'S NAM 2b. INDIVIDUAL'S LAST NA CHEYNE MAILING ADDRESS 9961 E. LANG	ADD'L INFO RE ORGANIZATION ORGANIZATION OBESTOR S EXACT FULL LEGAL NAME - insert only one E ME ELL VALLEY RD.	BONANZA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CHERIE CITY BONANZA	STATE OR 1g. ORGA ine names MIDDLE I J. C. STATE OR	POSTAL CODE 97623 ANIZATIONAL ID #, if any NAME POSTAL CODE 97623	SUFFIX COUNTRY USA
MAILING ADDRESS 9961 E. LANG SEE INSTRUCTIONS 12-96-9862 ADDITIONAL DEBTOR'S 2a. ORGANIZATION'S NAM 2b. INDIVIDUAL'S LAST NA CHEYNE MAILING ADDRESS 9961 E. LANG SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR S EXACT FULL LEGAL NAME - insert only one ME ELL VALLEY RD. ADD'L INFO RE ORGANIZATION	DONANZA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CHERIE CITY	STATE OR 1g. ORGA ine names MIDDLE I J. C. STATE OR	POSTAL CODE 97623 ANIZATIONAL ID #, if any NAME POSTAL CODE	SUFFIX COUNTRY USA
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MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS 42-96-9862 ADDITIONAL DEBTOR'S 2a ORGANIZATION'S NAM CHEYNE MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS 41-76-8297 SECURED PARTY'S NAM	ADD'L INFO RE ORGANIZATION DEBTOR 16. TYPE OF ORGANIZATION DEBTOR 16. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 16. TYPE OF ORGANI	DONANZA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CHERIE CITY BONANZA 2f. JURISDICTION OF ORGANIZATION	STATE OR 1g. ORGA ine names MIDDLE I J. C. STATE OR	POSTAL CODE 97623 ANIZATIONAL ID #, if any NAME POSTAL CODE 97623	SUFFIX COUNTRY USA
MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS 42-96-9862 ADDITIONAL DEBTOR'S 2a. ORGANIZATION'S NAM CHEYNE MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS 41-76-8297 SECURED PARTY'S NAM 3a. ORGANIZATION'S NAM	ADD'L INFO RE ORGANIZATION DEBTOR S EXACT FULL LEGAL NAME - insert only one ELL VALLEY RD. ADD'L INFO RE ORGANIZATION DEBTOR ME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S) E	DONANZA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CHERIE CITY BONANZA 2f. JURISDICTION OF ORGANIZATION	STATE OR 1g. ORGA ine names MIDDLE I J. C. STATE OR	POSTAL CODE 97623 ANIZATIONAL ID #, if any NAME POSTAL CODE 97623	SUFFIX COUNTRY USA
MAILING ADDRESS 9961 E. LANG SEE INSTRUCTIONS 42-96-9862 ADDITIONAL DEBTOR'S 2a. ORGANIZATION'S NAM CHEYNE MAILING ADDRESS 9961 E. LANG SEE INSTRUCTIONS 41-76-8297 SECURED PARTY'S NAM T - LIRRIGA	ADD'L INFO RE ORGANIZATION DEBTOR S EXACT FULL LEGAL NAME - insert only one ELL VALLEY RD. ADD'L INFO RE ORGANIZATION DEBTOR ME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S) E TION COMPANY	DONANZA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CHERIE CITY BONANZA 2f. JURISDICTION OF ORGANIZATION	STATE OR 1g. ORGA ine names MIDDLE I J. C. STATE OR	POSTAL CODE 97623 ANIZATIONAL ID #, if any NAME POSTAL CODE 97623 ANIZATIONAL ID #, if any	SUFFIX COUNTRY USA
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MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS 42-96-9862 ADDITIONAL DEBTOR'S 2a. ORGANIZATION'S NAM CHEYNE MAILING ADDRESS 9961 E. LANG SEEINSTRUCTIONS 41-76-8297 SECURED PARTY'S NAM T - L IRRIGA 3b. INDIVIDUAL'S LAST NA	ADD'L INFO RE ORGANIZATION DEBTOR S EXACT FULL LEGAL NAME - insert only one ELL VALLEY RD. ADD'L INFO RE ORGANIZATION DEBTOR ME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S) E TION COMPANY	DESCRIPTION OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CHERIE CITY BONANZA 2f. JURISDICTION OF ORGANIZATION P)-insert only one secured party name (3a or 3b)	MIDDLE MI	POSTAL CODE 97623 ANIZATIONAL ID #, if any NAME POSTAL CODE 97623 ANIZATIONAL ID #, if any	SUFFIX COUNTRY USA
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KLAMATH COUNTY, OREGON				LOAN # 1709
5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE	CONSIGNOR BAILEE/BAILOR	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. Check to REQUEST SEARCH REPO [ADDITIONAL FEE]	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor
8. OPTIONAL FILER REFERENCE DATA HENRY C. G. CHEYNE:	CHERIE J. C. CHEYNE	X (hen	00 00	Meeno

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ale of

	OR (1a or 1b) C	N RELATED FINANCING STA	TEMENT			
9a. ORGANIZATION'S NA	ME					
OR DE INDIVIDUALIS LAST N	ANAT	EIDOT NAME	MIDDLE MANE OUGEN			
	Bb. INDIVIDUAL'S LAST NAME CHEYNE HENRY		MIDDLE NAME, SUFFIX			
10.MISCELLANEOUS:		HENRY	C. G.			
11. ADDITIONAL DEBTOI 11a. ORGANIZATION'S NA OR 11b. INDIVIDUAL'S LAST I	ME	L LEGAL NAME - insert only <u>one</u> r	THE name (11a or 11b) - do not abbreviate or com		IS FOR FILING OFFIC	SUFFIX
11c. MAILING ADDRESS	**************************************		CITY	STATE	POSTAL CODE	COUNTRY
11d. <u>Seeinstructions</u>	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. OR	GANIZATIONAL ID #, if an	y Nor
12. ADDITIONAL SEC		S of ASSIGNOR S/P'S	NAME - insert only one name (12a or 12b))		
12a. ORGANIZATION'S NA	ME					
OR						
12b. INDIVIDUAL'S LAST I	NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS			CITY	STATE	DOSTAL CODE	COLINEEDY
120. WALING ADDRESS			CITY	SIAIE	POSTAL CODE	COUNTRY
13. This FINANCING STATEM	ENT covers tim	ber to be cut or as-extracted	16. Additional collateral description:			
collateral, or is filed as a	L_1					
14. Description of real estate:	_					
NE ¼ OF SECTION T 40 S, R 13 E KLAMATH COUN		V ¼ OF SECTION 1,				
15. Name and address of a RE (if Debtor does not have a r HENRY AND CHE	ecord interest)		17. Check only if applicable and check on Debtor is a Trust or Trustee acti	ng with respect to p	roperty held in trust or	Decedent's Esta
(if Debtor does not have a r	ecord interest)		Debtor is a Trust or Trustee acti	ng with respect to p	roperty held in trust or	Decedent's Esta
·	ecord interest)		Debtor is a Trust or Trustee acti	ng with respect to p ly one box,		Decedent's Estat

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