

M06-06285

Klamath County, Oregon

04/03/2006 08:24:02 AM

Pages 2 Fee: \$26.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
800-648-8026

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

DIVERSIFIED FINANCIAL SERVICES, LLC
14010 FIRST NATATIONAL BANK PKWY
STE 205
OMAHA, NE 68154

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 BALEY-TROTMAN FARMS	FIRST NAME	MIDDLE NAME	SUFFIX
OR 1b. INDIVIDUAL'S LAST NAME			
1c. MAILING ADDRESS P.O. BOX 417	CITY MALIN	STATE OR	POSTAL CODE 97632
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION GENERAL PARTNERSHIP	1f. JURISDICTION OF ORGANIZATION OREGON
			1g. ORGANIZATIONAL ID #, if any <input checked="" 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	FIRST NAME	MIDDLE NAME	SUFFIX
OR 2b. INDIVIDUAL'S LAST NAME BALEY	LON	E.	
2c. MAILING ADDRESS P.O. BOX 417	CITY MALIN	STATE OR	POSTAL CODE 97632
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION GENERAL PARTNERSHIP	2f. JURISDICTION OF ORGANIZATION OREGON
			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	FIRST NAME	MIDDLE NAME	SUFFIX
OR 3b. INDIVIDUAL'S LAST NAME			
3c. MAILING ADDRESS 14010 FIRST NATIONAL BANK PKWY STE 205	CITY OMAHA	STATE NE	POSTAL CODE 68154

4. This FINANCING STATEMENT covers the following collateral:

NEW MODEL 8000 VALLEY PIVOT 1180', 6T W/ 287' PRECISION CORNER ARM

50 HP CORNELL PUMP MODEL 5RB W/ SIZE 3 PANEL & SUMP W/ DOUBLE SCREENS

1380' CABLECON WIRE, 1400' 10" CLASS 80 PVC, FLOW METER, 220' 6" CLASS 125 GASKETED PVC, MISC. VALVES & FITTINGS

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)			All Debtors Debtor 1 Debtor 2		
8. OPTIONAL FILER REFERENCE DATA						

0040503-002

FILING OFFICE COPY — UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02)

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
BALEY-TROTMAN FARMS
OR
9b. INDIVIDUAL'S LAST NAME FIRST NAME 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
TROTMAN MARK R.
11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
P.O. BOX 417 MALIN OR 97632
11d. SEE INSTRUCTIONS 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:

S/2, S/2 N/2 & S/2 N/2 N/2 OF, LOT 5 & ALL OF LOT 2, ALL OF, LOT 13 T-41S R-11E KLAMATH COUNTY, OR

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

PATRICK D. & MICHELLE
RATLIFF

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