UCC FINANCING STATEMENT		M06-11710 Klamath County, Oregon 06/09/2006 09:48:32 AM Pages 6 Fee: \$46.00	
FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Northwest Farm Credit Services, PCA			
300 Klamath Avenue, Suite 200		4.	
♠ PO Box 148			
Klamath Falls, OR 97601			
	1		
DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a of CREANIZATIONIS NAME)	THE ABOV	E SPACE IS FOR FILING OFFICE USE ONLY	
1a.ORGANIZATION'S NAME V.H. Ranch, LLC	10) - 00 not appreviate or combine names	* * * * * * * * * * * * * * * * * * *	· · · · · · · · · · · · · · · · · · ·
OR 16. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS	CITY		
18419 West Langell Valley Road 1d. TAX ID #: SSN OR EIN ADDL INFO RE 16. TYPE OF ORGANIZATION	Bonanza	OR POSTAL CODE	COUNTRY
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION COMMON CO	11. JURISDICTION OF ORGANIZATION OR	1g. ORGANIZATIONAL ID #, if any OR789058-83	100/
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one 2a. ORGANIZATION'S NAME	debtor name (2a or 2b) - do not abbreviate or	combine names	NONE
V. H. Ranch Properties Limited Partnership			***************************************
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
18419 West Langell Valley Road 2d. TAX ID #: SSN OR EIN ADD'L INFO RE 26. TYPE OF ORGANIZATION	Bonanza 21. JURISDICTION OF ORGANIZATION	OR 97623 29. ORGANIZATIONAL ID #, If any	USA
ORGANIZATION Limited Partnership	OR	OR027380-94	
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of AS 3a. ORGANIZATION'S NAME	SIGNOR S/P) - Insert only one secured p	arty name (3a or 3b)	NONE
Northwest Farm Credit Services, PCA	7		
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
PO Box 148	Klamath Falls	OR 97601	USA
4. This FINANCING STATEMENT covers the follow All now owned or hereafter acquired collateral items of collateral described herein and investors.	described baroin inclu	ding without limited at	
require or pollutoral described Helefit and littlefitotal	accounts, general intand	ping, without limitation the type	Des or
collateral, and including:		y are a mar production and production	ccus oi
YEAR: 2006 K	IND: Circular I	Pivot	
MAKE: Valley MODEL: 7 Tower	I I A A I'M I'M I		
S.	UANTITY: 1		
See Addendum for Description of Property:			
THIS IS A FIXTURE FILING TO BE FILED FOR RI	ECORD IN THE REAL F	ESTATE RECORDS	
5. ALTERNATIVE DESIGNATION (if applicable) LESSEF/LESSOR CONSIGNED	E/CONSIGNOR BAILEE/BAILOR	SELLER/BUYER AG LIEN	0111100 5::::::
This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Attach Addendum (if applicable) OPTIONAL FILER REFERENCE DATA	Check to REQUEST SEARCH REPORT (ADDITIONAL FEE) (option	T(S) on Debtor(s)	1 Debtor 2

Financing Statement (44298-241)

	CC FINANCING STATE		VI							
9.	NAME OF FIRST DEBTOR (1A OR		TATE	MENT						
	9a. ORGANIZATION'S NAME		TATE	VICITI						
	V.H. Ranch, LLC									
OF	96. INDIVIDUAL'S LAST NAME	FIRST NAME			MIDDLE NAME, SUF	:IX				
					MADDEE HAME, SOF	'^ 				
10	MISCELLANEOUS:							_		
							1	. T		
						•	۲.	W.	•	
						THE ABOVE SPA	CE IS EOR	R FILING OFFICE U	10° 0111 1	,
11,	ADDITIONAL DEBTOR'S EXACT 112. ORGANIZATION'S NAME	T FULL LEGAL NAME - Insert	only on	g name (1	1a or 11b) - do not abbi	eviate or combine names	CE IS FOR	CFILING OFFICE C	ISE ONLY	<u> </u>
	THE ONGSHEATIONS NAME									
	V H Ranch Properties I	wanagement, inc.			. 4	\sim \sim	h. "			
OR	11b. INDIVIDUAL'S LAST NAME			FIRST	NAME		MIDDLE	AME		SUFFIX
				ar.	" A 1	. 1	-			
11c	MAILING ADDRESS			CITY			STATE	POSTAL CODE		COUNTRY
114	18419 West Langell Va	illey Road			anza		OR	97623		USA
1144		TE 119. TYPE OF ORGANIZATION CORPORATION			RISDICTION OF ORGA	ANIZATION	11g. ORG	ANIZATIONAL ID #, if	any	100,
	DEBTOR		ш	OR	ч. ч	h.	ុ០ឧរ៖	35318-87		
12.	ADDITIONAL SECURED PART	TY'S or ASSIGNOR S/	P'S N	AME - I	nsert only one name (1	2a or 12b)	.l			NONE
	12a. ORGANIZATION'S NAME			li.						
			la.	7			-			
OR	12b. INDIVIDUAL'S LAST NAME			FIRST	NAME		MIDDLE	NAME		SUFFIX
120	MAILING ADDRESS							7		001111
_	MAILING ADDRESS			CITY			STATE	POSTAL CODE		COUNTRY
13.	This FINANCING STATEMENT covers	timber to be cut or as extr		10.11						USA
	collateral, or is filed as a X fixture fili	- Land	acted	16. Ad	ditional collateral de	scription:	1			
14,	Description of real estate:	ng				- 7	- 4			
	- 1	l 16			-	~ ~				
	Twn. 40S, Range 13E,	Section 36, SE 1/4.			- #	- 76 7				
	W.P.M., Klamath Count	v. OR			> 10.		1			
	. N	· · · · · · · · · · · · · · · · · · ·	7		, N.		-			
		- //								
					46. "					
			ь.							
		7	•							
5 N	lame and address of a RECORD OWN	ED at above does the first of								
(f Debtor does not have a record interes	ich or above-described real estat st):	e							
				17. Chec	k <u>only</u> if applicable and	check only one box.				
				Debtor is		Trustee acting with respect	to omner	held in tour		dante Poor
			ŀ	18. Chec	k <u>only</u> if applicable and		property	held in trust or	Dece	dent's Estate
			}		or is a TRANSMITTING					
			ŀ			OTILITY anufactured-Home Transact				
						blic-Finance Transaction -				

FC	CC FINANCING PLLOW INSTRUCTION	G STATEMEN	NT ADDENDUM							
9.	NAME OF FIRST DEB	TOR (1A OR 1B) ON F	RELATED FINANCING STATE	MENT						
	9a. ORGANIZATION'S NA	MĒ								
	V.H. Ranch, L									
OR	9b. INDIVIDUAL'S LAST N	AME	FIRST NAME	MIDDLE NAME, S	UFFIX					
10.	MISCELLANEOUS:							_		
					ŀ			9.		
								7		
								-		
								. "		
							4	9. Y		
					4	. 1		A 1	b	
					₩.		D 4		-	
11	ADDITIONAL DEPT	ODIC EVACT FULL	LEGAL MALE		THE	ABOVE SPA	CE IS FOR	FILING OFFICE U	SE ONLY	
.,.	11a. ORGANIZATION'S NA	ME	LEGAL NAME - Insert only o	ne name (11a or 11b) - do not	abbreviate or co	mbine names				
) T	. "			
OR	11b. INDIVIDUAL'S LAST N	AME		FIRST NAME			MIDDLE			
	Hammerich			Wilmer		- 6	E.	IAME		SUFFIX
11c	MAILING ADDRESS			CITY	_		.1	T0005		
	18419 W Lang	eli Valley Rd	- 4	Bonanza	7		OR	POSTAL CODE 97623	ļ	COUNTRY
11d.	TAX ID #: SSN OR EIN	ADD'L INFO RE 116	TYPE OF ORGANIZATION	11f JURISDICTION OF O	RGANIZATION			ANIZATIONAL ID #, if a	INV	USA
		ORGANIZATION DEBTOR	100	67 Ta. 1	h.				•	
12.	ADDITIONAL SEC	URED PARTY'S or	ASSIGNOR S/P'S N	NAME - Insert only one name	e (12a or 12b)		<u> </u>			NONE
	12a. ORGANIZATION'S	NAME			0 (12a Bi 125)					
				T. 7			Alba-			
OR	12b. INDIVIDUAL'S LAS	T NAME		FIRST NAME			MIDDLE	NAME		SUFFIX
<u>a</u> :	MAILING ADDRESS									
				CITY			STATE	POSTAL CODE		COUNTRY
3.	This FINANCING STATE	MENT covers timbe	er to be cut or as extracted	16. Additional collatera	description					USA
	collateral, or is filed as a	fixture filing			, cescripaori,	•		_d		
4. 1	Description of real estate		76.			7	- 4			
	"					. 1				
					7		li.			
	46.	7 7	N 201				The same			
	76.	- W '			la d		-			
	- 1	- 11				_				
	-			1 1						
	-									
	_		- 1							
= h		50000 00000	, T							
). N	fame and address of a R f Debtor does not have a	ECORD OWNER of at record interest):	pove-described real estate							
		•								
				17. Check only if applicable	and check only	one box.				
				Debtor is a Trust or		ling with respect	to omnode:	hald in tour	- 7-	
				18. Check only if applicable			~ property	held in trust or	Deced	lent's Estate
				Debtor is a TRANSMITT						
				Filed in connection with		-Home Transac	lion . efforti	a 30 years		
				Filed in connection with	a Public Finance	A Transaction	offertive 20	e or years		

FOLLOW INSTRUCTIONS (front and bask) CARREFULLY IN MAKE OF FIRST DEBTOR (1A OR 19) ON RELATED FINANCING STATEMENT ON DESCRIPTION OF THE PROPERTY OF THE PROP	U	CC FINANCING	STATEMEN	T ADDENDUM						
U.H. RAIONES SPACE IS FOR FILING OFFICE USE CONLY 11. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - reset any got name (11s or 11s) - or not abbreviate of graphs in line. 12. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - reset any got name (11s or 11s) - or not abbreviate of graphs in line. 13. This province is seen in the province in line. 14. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - reset any got name (11s or 11s) - or not abbreviate of graphs in line. 15. WALLING AGRICATION IN MAKE 16. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - reset any got name (11s or 11s) - or not abbreviate of graphs in line. 16. WALLING AGRICATION IN LEGAL NAME 17. WALLING AGRICATION IN LEGAL NAME - reset any got name (11s or 12s) 18. ADDITIONAL SECURED RESPONSE IN LEGAL NAME - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - reset any got name (11s or 12s) 19. ADDITIONAL SECURED RESPONSE IN LINE - re	9.	NAME OF FIRST DEBTO	R (14 OR 18) ON P	CAREFULLY	LICHT		4			
III. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go name title or trip) do not addressed or dombus mins. THE ASINE SPACE IS FOR FILING DEFICE USE ONLY 11. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go name title or trip) do not addressed or dombus mins. 11. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go name title or trip) do not addressed or dombus mins. 11. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go name title or trip) do not addressed or dombus mins. 11. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go not not next day or down and title or trip). 12. ADDITIONAL SLAST WAVE 13. The POSTAL CODE 14. ADDITIONAL SLAST WAVE 15. THE ASION SOURCE IN THE POSTAL CODE OUT IN THE POST				ELATED FINANCING STATE	EMENI	·····	4			
III. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go name title or trip) do not addressed or dombus mins. THE ASINE SPACE IS FOR FILING DEFICE USE ONLY 11. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go name title or trip) do not addressed or dombus mins. 11. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go name title or trip) do not addressed or dombus mins. 11. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go name title or trip) do not addressed or dombus mins. 11. ADDITIONAL DEBTORS EXACT FULL LEGAL NAME - next day go not not next day or down and title or trip). 12. ADDITIONAL SLAST WAVE 13. The POSTAL CODE 14. ADDITIONAL SLAST WAVE 15. THE ASION SOURCE IN THE POSTAL CODE OUT IN THE POST		V.H. Ranch, LL	С				1			
THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY IT IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TORS THE ABOV	OF			FIRST NAME	М	IDDLE NAME, SUFFIX				
THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY IT IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TOR FILING OFFICE USE ONLY THE ABOVE SPACE IS TORS THE ABOV	-									
TITE CREATE TRANSITIONS NAME THE INDIVIDUALS LAST NAME SUFFIX	10	MISCELLANEOUS:			······································		7		-	
TITE CREATE TRANSITIONS NAME THE INDIVIDUALS LAST NAME SUFFIX							1		Th	
TITE CREATE TRANSITIONS NAME THE INDIVIDUALS LAST NAME SUFFIX									-	
TITE CREATE TRANSITIONS NAME THE INDIVIDUALS LAST NAME SUFFIX									- 1	
TITE CREATE TRANSITIONS NAME THE INDIVIDUALS LAST NAME SUFFIX							ł	- 46	- Th	
TITE CREATE TRANSITIONS NAME THE INDIVIDUALS LAST NAME SUFFIX							ł	4	~ ~	
TITE CREATE TRANSITIONS NAME THE INDIVIDUALS LAST NAME SUFFIX							i 4	7	A 7	h-
TITE CREATE TRANSITIONS NAME THE INDIVIDUALS LAST NAME SUFFIX							w	B 4	F 10. '	
TITE CREATE TRANSITIONS NAME THE INDIVIDUALS LAST NAME SUFFIX	11	ADDITIONAL DEDTO	30 EVA 07 EVA				THE ABOVE SPA	CE IS FOR	FILING OFFICE US	E ONLY
Hammerich Barbara J. Inc. MALING ADDRESS 184 19 W Langell Valley Rd BOT INFORE TITE TYPE OF ORGANIZATION ORGANIZATI	11.	11a. ORGANIZATION'S NAME	R'S EXACT FULL L	EGAL NAME - Insert only or	ne name (11a c	or 11b) - do not abbrevi	ate or combine names			
Hammerich Barbara J. Inc. MALING ADDRESS 184 19 W Langell Valley Rd BOT INFORE TITE TYPE OF ORGANIZATION ORGANIZATI						- 4	-	. Ч		
Hammerich Barbara J. Inc. MALING ADDRESS 184 19 W Langell Valley Rd BOT INFORE TITE TYPE OF ORGANIZATION ORGANIZATI	OR	11b. INDIVIDUAL'S LAST NAM	E		Triportin	100				
TIX MAILING ADDRESS 184 19 W Langell Valley Rd 101 TAX ID # SSN OR RIN ADDITIONAL SECURED PARTY'S gr ASSIGNOR SIP'S NAME - Insert only sign rame (122 or 12b) 12 ADDITIONAL SECURED PARTY'S gr ASSIGNOR SIP'S NAME - Insert only sign rame (122 or 12b) 13 This FINANCING STATEMENT covers Simper to the Qut or as extracted 16. Additional collateral description. 5. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest): 17. Check gight if applicable and check gight one box. Debtor is a Trust or Trustee acting with respect to property hald in trust or Decedent's Estate 18. Check gight if applicable and check gight one box. Debtor is a Trust or Trustee acting with respect to property hald in trust or Decedent's Estate 19. Check gight if applicable and check gight one box. Debtor is a Trust or Trustee acting with respect to property hald in trust or Decedent's Estate 19. Check gight if applicable and check gight one box. Debtor is a Trust or Trustee acting with respect to property hald in trust or Decedent's Estate 19. Check gight if applicable and check gight one box. Debtor is a TRUSHITHING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years			_			_	16.		IAME	SUFFIX
18419 W Langell Valley Rd Bonanza OR 97623 USA THE TAK TOF SWORE IN ADDITIONAL FLITE TYPE OF ORGANIZATION	11c.					ai a				
TAX ID #: SSN OR RIN ADDITIONAL SECURED PARTY'S or ASSIGNOR SIP'S NAME - Insert any one name (12s or 12s) 12 ADDITIONAL SECURED PARTY'S or ASSIGNOR SIP'S NAME - Insert any one name (12s or 12s) 13 In Individual's LAST NAME FIRST NAME MIDLE NAME SUFFIX WAILING ADDRESS CITY STATE POSTAL CODE COUNTRY USA 14. Description of real estate: 17. Check only if applicable and check only one box. Detect is a Trust or Trustee adding with respect to properly held in trust or Decodem's Estate 18. Check only if applicable and check only one box. Detect is a Trust or Trustee adding with respect to properly held in trust or Decodem's Estate 18. Check only if applicable and check only one box. Detect is a Trust or Trustee adding with respect to properly held in trust or Decodem's Estate 19. Check only if applicable and check only one box. Detect is a Trust or Trustee adding with respect to properly held in trust or Decodem's Estate 19. Check only if applicable and check only one box. Detect is a Trust or Trustee adding with respect to properly held in trust or Decodem's Estate 19. Check only if applicable and check only one box. Detect is a Trust or Tru			li Vallev Rd	- 46		070			1	
ORGANIZATION DESTOR ASSIGNOR SIPS NAME - Insert only ong name (12s or 12b) 12a. ORGANIZATION'S NAME Insert only ong name (12s or 12b) 12a. ORGANIZATION'S NAME Insert only ong name (12s or 12b)	11d	TAX ID #: SSN OR EIN		TYPE OF ORGANIZATION			ZATION			USA
ADDITIONAL SECURED PARTY'S gr ASSIGNOR SP'S NAME - insert only one name (12a or 12b)					er m			j rig. Orig.	ANIZATIONAL ID #, II an	ıy
12a. ORGANIZATION'S NAME FIRST NAME	12.			L LASSICNION SUNION	1				- 6	NONE
SUFFIX CITY STATE POSTAL CODE COUNTRY USA 16. Additional collateral description. 17. Check only if applicable and check goldy one box. Debtor is a		12a. ORGANIZATION'S NA	AME	I JASSIGNUR SIFS I	VAME - Inser	t only one name (12a c	or 12b)			
SUFFIX CITY STATE POSTAL CODE COUNTRY USA 16. Additional collateral description. 17. Check only if applicable and check goldy one box. Debtor is a	ı			400	Th	7		Alba.	- 10	
AMILING ADDRESS CITY STATE POSTAL CODE COUNTRY USA 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: 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 Truste acting with respect to property held in trust or Decodent's Estate 18. Check only if applicable and check only one box. Debtor is a TRANSHITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years	OR	12b. INDIVIDUAL'S LAST I	NAME		FIRST NA	ME		IMIDDI C	11115	
13. This FINANCING STATEMENT coversumper to be cut or as extracted collateral, or is filled as a fixture filling 16. Additional collateral description. 17. Check gnty if applicable and check gnty one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years				-/ 7				MIDDLE	NAME	SUFFIX
13. This FINANCING STATEMENT coversumper to be cut oras extracted collateral, or is filed as afixture filing 14. Description of real estate: 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 aTrust orTrustee acting with respect to property held in trust orDebtor is aTrust or	t2c	MAILING ADDRESS			CITY			STATE	POSTAL CODE	COUNTRY
5. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest): 17. Check gnly if applicable and check gnly one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check gnly if applicable and check gnly one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check gnly if applicable and check gnly one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years	12	This Equations of ATER						7		
5. 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				to be cut or as extracted	16. Additio	onal collateral desc	ription:			
5. 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 Decedem'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	14	collateral, or is filed as a	fixture filing	-			. "	- 4	-	
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years		bescription of real estate.		-			. .	-4		
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years				7		- 10	70.7			
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years			B. B.			- 10	- 10 '	•		
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years		Th	A 4			- 10	- 11	7		
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years		76.	- 10 '			70-				
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years		- 10	- 10		1	-4				
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years			4	- 1		- 11				
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years		700		- 10.						
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years				- 10	L	#				
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years	5 1	lame and address of a DEC	ODD OWNED at ab							
Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years	(f Debtor does not have a re	ecord interest):	ive-described real estate						
Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years										
Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years					17. Check o	nly if applicable and ch	eck only one box.	-		
18. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years								to nonnert	held in truet I	[] Donaton
Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction - effective 30 years								. ~ ргороку	new is ness of	Decedent's Estate
Filed in connection with a Manufactured-Home Transaction - effective 30 years										
Filed in connection with a Public-Finance Transaction - effective 30 years								lion - affami	19 30 upper	
					Filed in o	connection with a Public	-Finance Transaction -	effective 30	vears	

U	CC FINANCING STATEM	ENT ADDENDUM			
+	LLOW INSTRUCTIONS (front and bac NAME OF FIRST DEBTOR (1A OR 1B) OF	ck) CAREFULLY			
Э.	98. ORGANIZATION'S NAME	N RELATED FINANCING STA	TEMENT		
	V.H. Ranch, LLC				
OR	9b. INDIVIDUAL'S LAST NAME	I FIRST NAME			
		THOU WANE	MIDDLE NAME, SUFFIX		
10.	MISCELLANEOUS:			1	
				THE ABOVE SPACE IS FOR FILL	NG OFFICE HEE ONLY
11.	ADDITIONAL DEBTOR'S EXACT FUI	LL LEGAL NAME - Insert only	y <u>one</u> name (11a or 11b) - do not abbreviate	e or combine names	NG OFFICE USE ONLY
	Wilmer E. Hammerich, Tru	ustee of the Wilme	r E. Hammerich Trust	- <i>F</i> -	
	11b. INDIVIDUAL'S LAST NAME		FIRST NAME		
			The Hamiltonian	MIDDLE NAME	SUFFIX
11c	MAILING ADDRESS		CITY	STATE IPO	STAL CODE COUNTRY
	18419 W Langell Valley Ro		Bonanza		7623 COUNTRY
11d.		11e. TYPE OF ORGANIZATION Trust	111. JURISDICTION OF ORGANIZA		TIONAL ID #, if any
	DESTOR		OR J	1	d music
12.	ADDITIONAL SECURED PARTY'S 12a. ORGANIZATION'S NAME	or ASSIGNOR S/P'S	NAME - Insert only one name (12a or	12b)	X NONE
	124. ORGANIZATION'S NAME		F 5		
اء.	12b. INDIVIDUAL'S LAST NAME				
	20. INDIVIDUAL S LAST NAME		FIRST NAME	MIDDLE NAM	SUFFIX
2c	MAILING ADDRESS		CITY	STATE PO	STAL CODE COUNTRY
1	This FINANCING STATEMENT covers time	mber to be a disc		41 3	USA
	ollateral, or is filed as a fixture filing	mber to be cut or as extract	ed 16. Additional collateral descrip	otion:	
4. [Description of real estate:	- 1			
	. 7	la			
	<i>a</i> .	• 4			
		. //			
		- (
		``			
5. N	ame and address of a RECORD OWNER of	f above-described real estate			
(1	Debtor does not have a record interest):				
			17. Check only if applicable and chec	k anti- ana hai	
				k <u>only</u> one box. tee acting with respect to property held i	
				no some with respect to property held i	n trust or Decedent's Estate
				k only one boy	
			18. Check only if applicable and check		
			18. Check <u>only</u> if applicable and check Debtor is a TRANSMITTING UTIL		NA DEC

FC	CC FINANCING STATEMEN DLLOW INSTRUCTIONS (front and back)	CAREFULLY			
9.	NAME OF FIRST DEBTOR (1A OR 1B) ON R	FLATED FINANCING STA	TEMENT		
	9a. ORGANIZATION'S NAME	CONTED I INANOING STA	1 CMCN		
	V.H. Ranch, LLC				
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX		
10.	MISCELLANEOUS:			_	
11.	ADDITIONAL DEBTOR'S EXACT FULL	LEGAL NAME - Insert only		THE ABOVE SPACE IS FOR FILING OFFICE	USE ONLY
	Barbara J. Hammerich, Trus	tee, of the Barba	ara J. Hammerich Trus	st	
OR	11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
110	MAILING ADDRESS			10.0	ļ
	18419 W Langell Valley Rd		Popopa	STATE POSTAL CODE	COUNTRY
11d	TAX ID #: SSN OR EIN ADD'L INFO RE 11e.	TYPE OF ORGANIZATION	Bonanza 11f. JURISDICTION OF ORGANIZA	OR 97623 TION 11g ORGANIZATIONAL ID #,	USA
		ust	OR	THE ORGANIZATIONAL ID #,	if any
12.	ADDITIONAL SECURED PARTY'S or	LASSIGNOR SON	NAME - Insert only one name (12a or		X NONE
	12a. ORGANIZATION'S NAME	1 JAGGIGIVOK 3/F 3	INAIVIE - Insert only one name (12a or 1	12b)	
L			7 7		
OR	12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
12c					SUPPIX
- 1	MAILING ADDRESS				L.
- 1	MAILING ADDRESS		CITY	STATE POSTAL CODE	1000,,,,,,,
13.		to be cut or as extracte			COUNTRY
		to be cut or as extracte			
14.	This FINANCING STATEMENT covers timber collateral, or is filed as a fixture filing				1000,,,,,,,
14.	This FINANCING STATEMENT covers timber collateral, or is filed as a fixture filing Description of real estate:		ed 16. Additional collateral descrip	otion:	1000,,,,,,,
14.	This FINANCING STATEMENT covers timber collateral, or is filed as a fixture filing Description of real estate:		16. Additional collateral descrip	stion:	USA
14.	This FINANCING STATEMENT covers timber collateral, or is filed as a fixture filing Description of real estate:		16. Additional collateral descrip	signly one box. ee acting with respect to property held in trust	1000,,,,,,,
14.	This FINANCING STATEMENT covers timber collateral, or is filed as a fixture filing Description of real estate:		17. Check gally if applicable and check Debtor is a Trust or X Trust 18. Check gally if applicable and check	es golly one box. es acting with respect to property held in trust of golly one box.	USA
14.	This FINANCING STATEMENT covers timber collateral, or is filed as a fixture filing Description of real estate:		17. Check only if applicable and check Debtor is a Trust or X Trust 18. Check only if applicable and check Debtor is a TRANSMITTING UTIL	es golly one box. es acting with respect to property held in trust of golly one box.	USA