## **UCC FINANCING STATEMENT**

4. This FINANCING STATEMENT covers the following collateral:

OW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Diligenz, Inc. 1-800-858-5294 B. SEND ACKNOWLEDGMENT TO: (Name and Address) 24312385 Prepared by: Diligenz, Inc. 6500 Harbour Heights Pkwy, Suite 400 Mukilteo, WA 98275 Filed In: Oregon Klamath 2007-002266 Klamath County, Oregon

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02/09/2007 10:07:15 AM

Fee: \$26.00

<u> </u>		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	THE ABOVE	SPACE IS FO	R FILING OFFICE US	SE ONLY	
1. DEBTOR'S EXACT FU	JLL LEGAL NAME	- insert only <u>one</u> debtor name (1a o	r 1b) - do not abbreviate or combine names				
1a. ORGANIZATION'S NA	ME						
OR 16. INDIVIDUAL'S LAST N	OR 1b. INDIVIDUAL'S LAST NAME			FIRST NAME MIDDLE		SUFFIX	
Wilson			Richard	D.	D.		
1c. MAILING ADDRESS			CITY	STATE	STATE POSTAL CODE		
5521 Benchwood	ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION	Klamath Falls	OR	97603	USA		
1d. TAX ID#: SSN OR EIN		1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG/	1g. ORGANIZATIONAL ID #, if any		
	ORGANIZATION   Sole Proprietorship		OR		NONE		
2. ADDITIONAL DEBTOR	R'S EXACT FULL	LEGAL NAME - insert only one de	ebtor name (2a or 2b) - do not abbreviate or con	nbine names			
2a. ORGANIZATION'S NA	ME						
OR 2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		SUFFIX		
- 2c, MAILING ADDRESS			СПҮ	STATE	POSTAL CODE	COUNTRY	
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DESTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID #, if any	, Innone	
A SECURED BARTYS		TOTAL ACCIONEE of ACCIONOR	S/P) - insert only one secured party name (3a o	ir 3h)		1 J NONE	
3a. ORGANIZATION'S NA PENTECH FUI	AME		Grey - insert only <u>one</u> secured party name (32 c	30)			
OR 3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME			
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY	
910 East Hamilton Ave Suite #400			Campbell	CA	95008	USA	

			<del></del>			TT
<ol><li>ALTERNATIVE DESIGNATION [if applicable]:</li></ol>		CONSIGNEE/CONSIGN		SELLER/BUYER	AG, LIEN	NON-UCCFILING
6. This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum	for record] (or recorded) in the [if	e REAL 7. Check applicable] [ADDIT	o REQUEST SEARCH REPO IONAL FEEI	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA						24312385

All equipment, general intangibles and all modifications and attachments thereto and replacements therefore now and hereafter covered by the Equipment Lease Agreement dated as of 11/21/06 between Alliance Funding Group, Inc. as Lessor and Richard D. Wilson, Ind. dba Dent Krafters of Central Oregon as Lessee and all additional commitments related thereto.

		TEMENT ADDEND	UM				* # A	
	LOW INSTRUCTIONS (front an	d back) CAREFULLY or 1b) ON RELATED FINANCIN	COLAT	TARACT				
	98. ORGANIZATION'S NAME	OF 10) ON RELATED FINANCIN	GSIAI	EMENI				
OR.								
J.,	9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME, SUFFIX				
	Wilson	Richard		D.				
10.N	MISCELLANEOUS:							
					THE ABOV	E SPACE	IS FOR FILING OF	EICE LISE ONLY
11. A	ADDITIONAL DEBTOR'S EXA	CT FULL LEGAL NAME - insert on	y one na	me (11a or 11b) - do not abbrev	iate of combine nar	nes	IO I OK I ILING OF	ICE USE ONLY
ſ	11a. ORGANIZATION'S NAME				india of our latter than	1103		<del></del>
OR								
	11b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME		SUFFIX
	HAN DIO ADDRESS							
116. 1	MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
11d. 1	TAX ID #: SSN OR EIN ADD'L IN	FO RE 118. TYPE OF ORGANIZATION	ON	11f. JURISDICTION OF ORGAN	IZATION:			
	ORGANIZ DEBTOR	ZATION '	, i	THE SURGERICATION OF ORGAN	NZATION	111g. OR	SANIZATIONAL ID #, if	
12.	ADDITIONAL SECURED P		פיםעפ	NAME - insert only one name	(40 40)			NO
[	12a. ORGANIZATION'S NAME		O/F O	INAME - Insert only one name	(128 or 12b)			
	ALLIANCE FUNDING	GROUP, INC.						
	12b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE	NAME	SUFFIX
						1		
	mailing address 2099 S. STATE COLL	FGE SUITE 100		CITY ANAHEIM		STATE	POSTAL CODE	COUNTRY
	his FINANCING STATEMENT covers					CA	92806	USA
	oliateral, or is filed as a K fixture f		acted	<ol> <li>Additional collateral description</li> </ol>	otion:			
14. D	escription of real estate:							
R-39	909-003CC-00101-000	) .				-		
			.					
			l					
			- 1					
15. N	ame and address of a RECORD OW f Debtor does not have a record intere	NER of above-described real estate						
	perg Company, LLC	<del></del>						
2811	Broadmore Street		_					
Klamath Falls, OR 97603		R 97603		7. Check only if applicable and				
				ebtor is a Trust or Ti			operty held in trust or	Decedent's Estat
			ľ	8. Check only if applicable and		x.		
				Debtor is a TRANSMITTING Filed in connection with a M		Tmn		
			ŀ	Filed in connection with a P				
				in connection with 8 F	anno monue mans	acaon en	ecuve ao years	

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