

2007-013074
Klamath County, Oregon



07/24/2007 09:02:44 AM

Fee: \$21.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME PHONE OF CONTACT AT FILER [optional]	
Helmi Shogren	(509) 327-9634
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UPF Incorporated 910 West Boone Ave. Spokane, WA 99201	

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	FIRST NAME	MIDDLE NAME	SUFFIX
	Torgersen	Guy		
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE
9990 Dehlinger Lane	Klamath Falls		OR	97603-
1d. TAX ID #: SSN OR EIN	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	FIRST NAME	MIDDLE NAME	SUFFIX
	Torgersen	Robin		
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE
9990 Dehlinger Lane	Klamath Falls		OR	97603-
2d. TAX ID #: SSN OR EIN	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

OR	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE
PO Box 97000	Lynnwood		WA	98046
				COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

VINYL SIDING, 15 WINDOWS, INSULATION

TWP 40 RNGE 10, BLOCK SEC 8, TRACT NE4NW4 & NW4NE4 E OF DRAIN, County of Klamath, State of Oregon

APN: R-4010-00800-00300-000

5. ALTERNATE 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) 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		
8. OPTIONAL FILER REFERENCE DATA				
UPF Tracking #1161592-15401		Loan #		SBA Loan #

FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)