



08/03/2007 08:43:50 AM

Fee: \$31.00

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 NATIONAL BANK PKWY
STE 400
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

OR

1b. INDIVIDUAL'S LAST NAME
WIERSMA

FIRST NAME
EARL

MIDDLE NAME
W.

SUFFIX

1c. MAILING ADDRESS
P.O. BOX 177

CITY
BONANZA

STATE
OR

POSTAL CODE
97623

COUNTRY

1d. SEE INSTRUCTIONS

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

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

2d. SEE INSTRUCTIONS

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
DIVERSIFIED FINANCIAL SERVICES, LLC

OR

3b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

3c. MAILING ADDRESS
14010 FIRST NATIONAL BANK PKWY STE 400

CITY
OMAHA

STATE
NE

POSTAL CODE
68154

COUNTRY

4. This FINANCING STATEMENT covers the following collateral:

1 NEW 2007 VALLEY MODEL 8000 2 WHEEL HOSE DRAG LINEAR 1260', 7T

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 REPORT(S) on Debtor(s) (OPTIONAL FEE) (optional) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA

0126998-002

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

| | | | |
|----|----------------------------|------------|---------------------|
| OR | 9a. ORGANIZATION'S NAME | | |
| | 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX |
| | WIERSMA | EARL | W. |

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

| | | | | |
|-----------------------|-----------------------------------|---------------------------|-----------------------------------|----------------------------------|
| OR | 11a. ORGANIZATION'S NAME | | | |
| | 11b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
| 11c. MAILING ADDRESS | | CITY | STATE | POSTAL CODE |
| | | | | COUNTRY |
| 11d. SEE INSTRUCTIONS | ADD'L INFO RE ORGANIZATION DEBTOR | 11e. TYPE OF ORGANIZATION | 11f. JURISDICTION OF ORGANIZATION | 11g. ORGANIZATIONAL ID #, if any |
| | | | | <input type="checkbox"/> NONE |

12. ☐ ADDITIONAL SECURED PARTY'S ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

| | | | | |
|----------------------|-----------------------------|------------|-------------|-------------|
| OR | 12a. ORGANIZATION'S NAME | | | |
| | 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:

SEE EXHIBIT "A", KLAMATH COUNTY, OR

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

EARL W. WIERSMA
PAMELA F. WIERSMA

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
- ☐ Filled in connection with a Manufactured-Home Transaction — effective 30 years
- ☐ Filled in connection with a Public-Finance Transaction — effective 30 years

EXHIBIT "A"

Parcel 3:

All in Township 39 South, Range 11 East of the Willamette Meridian, Klamath County, Oregon:

Section 15: W1/2 NE1/4, SE1/4, S1/2 NW1/4, all that portion of the N1/2 NW1/4 lying South of Lost River, and the N1/2 SW1/4 SAVING AND EXCEPTING the following: That tract of land described as follows: Beginning at a ½ inch iron pin from which the Northwest corner of said Section 15 bears North 01°44'03" West 3,681.45 feet; thence South 78°02'07" East 174.45 feet to a ½ inch iron pin; thence South 89°52'45" East 231.30 feet to a ½ inch iron pin; thence South 89°20'52" East 801.00 feet to a ½ inch iron pin; thence South 15°16'07" East 217.00 feet to a ½ inch iron pin; thence continuing South 15°16'07" East 20 feet, more or less, to the South line of the N1/2 SW1/4 of said Section 15; thence Westerly along said line to the Southwest corner of the NW1/4 SW1/4 of said Section 15; thence Northerly along the West line of said Section 15 to a point that bears South 81°00'05" West from the point of beginning; thence North 81°00'05" East to a ½ inch iron pin set in an existing North-South fence line; thence continuing North 81°00'05" East 76.21 feet to the point of beginning, with bearings based on Bowne Addition to the Town of Bonanza.