2008-002397 Klamath County, Oregon

02/26/2008 11:02:52 AM

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Fee: \$26.00

UCC FINANCING STATEMENT

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 PARKWAY, 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	r 1b) - do not abbreviate or combine names			
1a. ORGANIZATION'S NAME				
	ing pada dalah dalah <u>kecamatan dal</u>			
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
MITCHELL	LARRY			
1c. MAILING ADDRESS	cmy	STATE	POSTAL CODE	COUNTRY
1050 MITCHELL RD.	DAIRY	OR	97625	USA
1d. TAX ID#: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION	1f, JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	
ORGANIZATION DEBTOR				NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one de	ebtor name (2a or 2b) - do not abbreviate or combine	names		
2a. ORGANIZATION'S NAME				
		1 1 2		
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
20. BALLING ADDITECT				
24 TAY ID # SSN OR FIN ADD'L INFO RE 26. TYPE OF ORGANIZATION	2f, JURISDICTION OF ORGANIZATION	2a, ORC	ANIZATIONAL ID #, if any	
Zd. TAX ID #: SSN OR EIN ADD'L INFO RE 2e, TYPE OF ORGANIZATION DEBTOR	2,33(10)10110101			NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only one secured party name (3a or 3b)	12.00		
3a, ORGANIZATION'S NAME				
DIVERSIFIED FINANCIAL SERVICES, LLC				
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
14010 FIRST NATIONAL BANK PARKWAY, 400	ОМАНА	NE	68154	USA
14010 FIRST NATIONAL DANK FARKWAT, 400	J			

4. This FINANCING STATEMENT covers the following collateral:

1-NEW 2008 MODEL 8000 VALLEY PIVOT 1385' 7-TOWER W/PRECISION CORNER ARM 287'

CORNELL 50 HP PUMP, XLINE START PANEL, 1360' 10" PVC, 1440' 4-#2 AL W/2 #12 CU IN PVC, 10" FLOW METER, MISC. VALVES & FITTINGS

				_		7
5. ALTERNATIVE DESIGNATION [if applicable]:		CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
S. L. HRIS FINANCING STATEMENT IS to be filed	for record] (or recorded) in the	REAL 7. Check to REQUENCE (ADDITIONAL)	JEST SEARCH REPOR	(T(S) on Debtor(s)	All Debtors De	ebtor 1 Debtor 2
P. JESTATE RECORDS. Allacti Addenosiii		applicable 1 TADOTHOMAS			Town the second	
8. OPTIONAL FILER REFERENCE DATA						
#154405-001 J.W. KERNS, INC.						

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LLOW INSTRUCTIONS (front and back) C NAME OF FIRST DEBTOR (1a or 1b) ON	RELATED FINANCIN	G STATEMENT				
9a. ORGANIZATION'S NAME	VI Children I Million					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUF	FIX			
MITCHELL	LARRY					
MISCELLANEOUS:						
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11a. ORGANIZATION'S NAME						
				MIDDLE N	AME	SUFFIX
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	,	
				STATE	POSTAL CODE	COUNTRY
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DEBTOR			40000000000000000000000000000000000000			
12a, ORGANIZATION'S NAME	S or ASSIGNOR	R S/P'S NAME - insert only one	name (12a or 12b)	MIDDLE	NAME	SUFFIX
12a, ORGANIZATION'S NAME	S or ASSIGNOF	FIRST NAME	name (12a or 12b)			
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME	S or ASSIGNOF		name (12a or 12b)		NAME POSTAL CODE	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS		FIRST NAME CITY				SUFFIX
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS 3. This FINANCING STATEMENT covers		FIRST NAME				
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