## 2008-015638 Klamath County, Oregon

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USS THE NAME OF STATEMENT		11/20/2008 01:23:59 PM			Fee: \$21	
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY		ė.				
A. NAME & PHONE OF CONTACT AT FILER [optional]		1				
Rowena A. Chase (541) 883-6924 (108)						
3. SEND ACKNOWLEDGMENT TO: (Name and Address)						
Г	$\neg$					
USDA/Farm Service Agency	1					
2316 South 6th Street						
Suite C						
Klamath Falls, OR 97601				4		
1	ı					
L		THE ABOVE	SPACE IS FO	OR FILING OFFICE U	ISE ONLY	
, DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1	a or 1b) - do not abbi		OI AGE IO .	OKT TELEVISION OF THE C	JOE OILE!	
1a. ORGANIZATION'S NAME	.,					
_						
DR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE		SUFFIX	
KIRBY		CHRISTOPHER		N		
c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
45850 GERBER ROAD	BONANZA		OR	97623	USA	
d. <u>SEE INSTRUCTIONS</u>   ADD'L INFO RE   1e. TYPE OF ORGANIZATION   ORGANIZATION	11. JURISDICTION	1f. JURISDICTION OF ORGANIZATION		1g, ORGANIZATIONAL ID #, if any		
DEBTOR	<u> </u>					
. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one	debtor name (2a or 2	2b) - do not abbreviate or cor	nbine names			
2a. ORGANIZATION'S NAME						
PR 2b. INDIVIDUAL'S LAST NAME	I FIRST NAME		MIDDLE	NAME	SUFFIX	
KIRBY	SARA		MICHELLE			
c. MAILING ADDRESS	CITY			POSTAL CODE	COUNTRY	
45850 GERBER ROAD	BONANZA		OR	97623	USA	
d. SEE INSTRUCTIONS   ADD'L INFO RE   2e. TYPE OF ORGANIZATION	2f. JURISDICTION	OF ORGANIZATION	2g. ORGA	ANIZATIONAL ID #, if any	<del>, 1</del> .	
ORGANIZATION DEBTOR					Пиои	
SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE OF ASSIGN	OR S/P) - insert only	one secured party name (3a	or 3b)	• • • • • • • • • • • • • • • • • • • •		
3a. ORGANIZATION'S NAME			<u> </u>	•		
UNITED STATES OF AMERICA acting the	nrough Farn	n Service Agenc	y			
3b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME		SUFFIX	
: MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
2316 SOUTH 6TH STREET, SUITE C	KLAMAT	HFALLS	OR	97601	USA	
This FINANCING STATEMENT covers the following collateral:						
(a) All crops, livestock, farm products, equipm	ent, certifica	ates of title, goo	ds, suppl	ies, inventory.	accounts.	
deposit accounts, supporting obligations, contra						
property, gross receipts, equities, revolving fun						
penefits, and payments from all State and Fede			ij pujino	ino, <b>and a</b> n on	entronnonts,	
(b) Complete irrigation system including but no			/4 mile w	haal linas 25	нр	
Marathon pump, 15HP pump MDL Y6745, ma						
	•	mine, misc.varve	s, spriik	icis, iliciudilig	; iaiiii	
equipment plus any additions or replacements to						
(c) Proceeds of such collateral are also covered		3				
(d) Disposition of such collateral is NOT hereb	y authorize	d.				
ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CO	INSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BU	YËR AG. LIEN	NON-UCC FILING	
This FINANCING STATEMENT is to be filed [for record] (or recorded) in Attach Addendum [if applicable]	INÉ REAL ESTATE F	RECORDS. 7.	See Instruction	n Debtor(\$)		
OPTIONAL FILER REFERENCE DATA		•				
· <del></del> ··						