<b></b>	

**UCC FINANCING STATEMENT** FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (optional)

## Klamath County, Oregon

07/10/2009 11:08:26 AM

Fee; \$21.00

Rowena A. Chase (541) 883-6924 Ext. 108					•
B. SEND ACKNOWLEDGMENT TO: (Name and Address)					
	$\neg$				
USDA/Farm Service AGency	1				
2316 South 6th Street					
Suite C					
Klamath Falls, OR 97601		,			
·	1				
		THE ABOVE	SDACE IS EO	R FILING OFFICE U	SE ONI V
DEBTOR'S EXACT FULL LEGAL NAME – insert only one debtor name (1:	a or 1h) - do not abbr		SPACE IS FO	R FILING OFFICE U	JE CHLT
1a. ORGANIZATION'S NAME	2 01 157 00 1101 0000				
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	AME	SUFFIX
BAIR	COLT		THON		
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
6829 HENLEY ROAD	KLAMAT		OR	97603	USA
1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION	1f. JURISDICTION	OF ORGANIZATION	1g. ORGAI	NIZATIONAL ID #, if any	
DEBTOR					NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one	debtor name (2a or 2	b) - do not abbreviate or con	nbine names		
2a. ORGANIZATION'S NAME					
OR 75 INDIVIDUAL'S LAST NAME	Towns Market		MIDDLE NAME		SUFFIX
2D. INDIVIDUAL'S LAST NAME	FIRST NAME		IWIODELIN	-IVIL	100/11/
2c MAILING ADDRESS	CITY	*	STATE	TPOSTAL CODE	COUNTRY
E. IMENIO / DOI 1200					
2d. SEE INSTRUCTIONS   ADD'L INFO RE   29. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION		2g. ORGANIZATIONAL ID #, if any		
ORGANIZATION DEBTOR					□none
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE OF ASSIGN	DR S/P) - insert only	one secured party name (3a	or 3b)	· · · · · · · · · · · · · · · · · · ·	
3a. ORGANIZATION'S NAME					
UNITED STATES OF AMERICA acting the	nru FARM S	SERVICE AGE	NCY .		
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME		SUFFIX
·					
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
2316 SOUTH 6TH STREET, STE C	KLAMAT	H FALLS	OR	97601	USA
4. This FINANCING STATEMENT covers the following collateral:					

- a. All crops, livestock, farm products, equipment, certificates of title, goods, supplies, inventory, accounts, deposit accounts, supporting obligations, contract rights, payment intangibles, general intangibles, investment property, gross receipts, equities, revolving funds, crop insurance indemnity payments, and all entitlements, benefits, and payments from all State and Federal farm programs.
- b. All irrigation equipment, now owned and used, in whole or in part, to irrigate the mortgage property, together with all similar goods which may be acquired at any time, any additions, replacements, substitutions and accessions; and
- c. All proceeds, products, accessions, and security acquired hereafter. Disposition of such collateral is NOT hereby authorized.

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. See Instruction Debtor(s)  8. OPTIONAL FILER REFERENCE DATA  USA/Farm Service Agency by: ROWENA A. CHASE, PT						
Attach Addendum [If applicable]  8. OPTIONAL FILER REFERENCE DATA	5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR CONSIGNEE/CONSIGNO	OR BAILEE/BAILOF	R SELLER/BUYER	AG. LIEN NON-UCC FI	LING
/ · · · · /// / V/./ A ()		e filed [for record] (or recorded) in the REAL ESTATE	E RECORDS.	7. See Instruction Del	btor(s)	
55121 Will 54-1-1-8-1-1		by: ROWENA A. CHASE, P	T Kone	ma A.	Chase	