UCC FINANCING STATEMENT

Klamath County, Oregon

06/16/2010 09:59:34 AM

Fee: \$42.00

50703790

OLLOW INSTRUCTION	IS (front and back)	CAREFULLY	06/				
A, NAME & PHONE OF C	ONTACT AT EU F	? (optional)					
Corporation Service		800-858-5294					
3. SEND ACKNOWLEDG	5 - G - G - G - G - G - G - G - G - G -						
50703790 - 31			1				
	n Service Con						
801 Adlai S	Stevenson Dri	ve					
Springfield,	IL 62703						
1		Filed In: Oreg					
<u> </u>			TH	E ABOVE SPACE IS FO	R FILING OFFICE US	ONLY	
DEBTOR'S EXACT F	ULL LEGAL NAME -	insert only <u>one</u> debtor name (1a or 1b)	-do not abbreviate or combine names				
1a. ORGANIZATION'S N		· · · · · · · · · · · · · · · · · · ·					
				la nomi =		ISUFFIX	
16. INDIVIDUAL'S LAST	NAME		FIRST NAME	MIDDLE	NAME	SOFFIX	
Jertberg			Joseph	R	· · · · · · · · · · · · · · · · · · ·	COUNTRY	
c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	USA	
3515 Swan Lake F			Klamath Falls	OR	97603	USA	
d. SEE INSTRUCTIONS	ADD'L INFO RE	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZA	SDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any		_	
	ORGANIZATION DEBTOR	lndividual	OR		× NO		
2 ADDITIONAL DEBTO	R'S EXACT FULL	LEGAL NAME - insert only one of	lebtor name (2a or 2b) - do not abbrev	viate or combine names			
2a, ORGANIZATION'S							
				IMPOLE	NIANAE	SUFFIX	
2b, INDIVIDUAL'S LAST	NAME	·	FIRST NAME		MIDDLE NAME		
Meyer			Melody	M			
2c. MAILING ADDRESS			СПҮ	STATE	POSTAL CODE	COUNTRY	
3515 Swan Lake	Rd		Klamath Falls	OR	97603	USA	
2d. SEE INSTRUCTIONS	ADD'L INFO RE	2e. TYPE OF ORGANIZATION	2f, JURISDICTION OF ORGANIZA	ATION 2g. ORG	2g. ORGANIZATIONAL ID #, if any		
	ORGANIZATION DEBTOR	Individual	OR			× NO	
3. SECURED PARTY	S NAME (or NAME of	TOTAL ASSIGNEE of ASSIGNOR S/	P) - insert only <u>one</u> secured party name	(3a or 3b)			
3a. ORGANIZATION'S	NAME						
Ja. OROMINE CHOILE	m Credit Servi	ces, FLCA	FIRST NAME		· · · · · · · · · · · · · · · · · · ·	SUFFIX	
Northwest Fari		OR 36. INDIVIDUAL'S LAST NAME			NAME	SOFFIX	
Northwest Fari	TNAME						
Northwest Fari	TNAME		0.774	STATE	POSTAL CODE	COUNTRY	
Northwest Fari	TNAME		crry Spokane	STATE WA	POSTAL CODE 99220-2515	COUNTRY	

S ALTERNATIVE DESIGNATION (if applicable): ILESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NO	N-UCC FILING
3, ALTERNATIVE DEGICINATION IN OPPROADS. TEXTS IN THE STATE OF THE STA	1 Debtor 2
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL [7, Check to REQUEST SEARCH REPORT(S) on Debtor(s) All Debtors Debtor) Debtor 2
8. OPTIONAL FILER REFERENCE DATA	50703700

・ いっぱき ヘモ ピログブ リトレ・バン	R (1a or 1b) Of	CAREFULLY N RELATED FINANCING STAT	EMENT				
9a. ORGANIZATION'S NAME							
_							
9b. INDIVIDUAL'S LAST NAM	E	FIRST NAME	MIDDLE NAME, SUFFIX				
Jertberg		Joseph	R				
.MISCELLANEOUS:			1				
			*				
				THE ABOVE	SPACE	S FOR FILING OFFI	CE USE ONLY
1 ADDITIONAL DEBTOR	S EXACT FULI	LEGAL NAME - insert only one n	ame (11a or 11b) - do not abbrevia	te or combine name	:s		
11a, ORGANIZATION'S NAM	E						
					IMPOLE I	NAME	SUFFIX
11b. INDIVIDUAL'S LAST NA	ME		FIRST NAME		MIDDLE NAME		
					STATE	POSTAL CODE	COUNTRY
c. MAILING ADDRESS			CITY				
		11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGAN	IZATION	11g. ORG	 BANIZATIONAL ID #, if a	ny
d. SEEINSTRUCTIONS	ADD'L INFO RE	116. TIPE OF ORGANIZATION	THE COMBBION OF THE STATE OF TH		1		Пис
	DEBTOR			40 40b)			
2. ADDITIONAL SECU	RED PARTY	S or ASSIGNOR S/P'S	NAME - insert only one name (12a or 12b)			
12a. ORGANIZATION S NAM	/IE						
R 12b. INDIVIDUAL'S LAST N	AME"		FIRST NAME		MIDDLE	NAME	SUFFIX
125, HADIVIDUAL BEACH							
2c. MAILING ADDRESS		<u></u>	CITY		STATE	POSTAL CODE	COUNTRY
			<u> </u>				
3. This FINANCING STATEME	NT covers ti	mber to be cut or as-extracted	16. Additional collateral descrip	otion:			
collateral, or is filed as a		_					
4. Description of real estate:	-	t					
The east one-half o	the south	east one-quarter of					
Section 16, Towns	iip oo ouu diaa Klam	th, Ranch 10, East of ath County, Oregon					
the Willamette Mer lying north of Swan	Lake Roa	d					
lying north of Swan	Lake Moa	u.					
15. Name and address of a RE	CORD OWNER	of above-described real estate					
(if Debtor does not have a r	ecord interest):						
			17. Check only if applicable ar	nd check <u>only</u> one b	οαχ.		По v <i>п</i>
			Debtor is a Trust or			property held in trust o	Decedent's E
			18. Check only if applicable a		oox.		
			Debtor is a TRANSMITTIN			effective 20 ···-	
			Filed in connection with a				
			Filed in connection with a		4.* .	-Martine 20	