2010-012759 Klamath County, Oregon

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11/01/2010 10:38:42 AM

Fee: \$37.00

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY	·			
A. NAME & PHONE OF CONTACT AT FILER [optional]				
Rowena A. Chase (541) 883-6924 Ext. 108				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
	-			
USDA/Farm Service Agency	¹ 1			
2316 South 6th Street	i			
Suite C				
Klamath Falls, OR 97601				
Klamath Lans, Ore 57000	, 1			
	.			
			R FILING OFFICE U	SE ONLY
1. DEBTOR'S EXACT FULL LEGAL NAME – insert only one debtor name (1	a or 1b) - do not abbreviate or combine name:	·		
1a. ORGANIZATION'S NAME				
OR 1b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE N	AME	SUFFIX
ID. INDIVIDUAL S EAST NAME	KEVIN	BRAI		
SMITH 1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
21740 NORTH MALIN ROAD	MALIN	OR	97632	USA
1d, SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGANIZATION			NIZATIONAL ID #, if any	
ORGANIZATION DEBTOR		-		NONE
]	(2 2h) de det abbreviete es	sembles pamet		[_]NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one [2a, ORGANIZATION'S NAME]	g deptor name (2a or 2b) - oo not abbreviate or	combine names		
Za. ORGANIZATION 5 NAME				
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE N	AME	SUFFIX
ZU. HADIATO CAROLINATE				
2c, MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION	2f, JURISDICTION OF ORGANIZATION	2g. ORGA	NIZATIONAL ID #, if any	,
ORGANIZATION DEBTOR		NONE		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE OF ASSIGN	IOR S/P) - insert only one secured party name	(3a or 3b)		
3a, ORGANIZATION'S NAME				
UNITED STATES OF AMERICA acting the	hrough FARM SERVICE	AGENCY		
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME			SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2316 SOUTH 6TH STREET, STE C	KLAMATH FALLS	OR	97601	USA
4. This FINANCING STATEMENT covers the following collateral:			•	
	ant certificates of title or	ode eunnlie	es inventory	accounts
a. All crops, livestock, farm products, equipme	ent, confidence of thic, go	ribles gener	ol intencibles	invectment
deposit accounts, supporting obligations, contr	act rights, payment intang	gibies, gener	ar mangiores	, mvesiment
property, gross receipts, equities, revolving fur	as, crop insurance indem	mny paymer	its, and an en	mements,
benefits, and payments from all State and Feder	eral farm programs.			
b.Complete irrigation equipment, machinery as	nd farm equipment (whee	l lines, pum	p, and motor,	stock trailer,
baler); and				
c. All proceeds, products, accessions, and secu	rity acquired hereafter.			
1 /1 /	-			
Disposition of such collateral is NOT hereby a	uthorized.			jen
Disposition of Santa Comments and the Santa Sant				<u>_</u>
5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR C	ONSIGNEE/CONSIGNOR BAILEE/BAILOR	SELLER/BUY	ER AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for record] (or recorded) i		7. See Instruction	Debter/s)	

Kowene A. Chase

8. OPTIONAL FILER REFERENCE DATA FARM Service Agency (FSA) by: