

MT 92353-W

2012-000175

Klamath County, Oregon



00112278201200001750030038

01/09/2012 03:21:19 PM

Fee: \$47.00

RECORDING COVER SHEET

ORS 205.234

This cover sheet has been prepared by the person presenting the attached instrument for recording. Any error in this cover sheet DOES NOT affect the transaction(s) contained in the instrument itself.

Reference - Escrow No. MT92353-DS
Title Order No. 0092353

Please print or type information.

1. AFTER RECORDING RETURN TO -

Required by ORS 205.180(4) & 205.238:

Name: **Farm Credit Services-Klamath Falls**

Address: **300 Klamath Ave. Ste 200**

City, ST Zip: **Klamath Falls, OR 97603**

2. TITLE(S) OF THE TRANSACTION(S) - Required by ORS 205.234(1)(a)

Note: "Transaction" means any action required or permitted by law to be recorded, including, but not limited to, any transfer, encumbrance or release affecting title to or an interest in real property. Enter descriptive title for the lien instrument:

Document Title(s): UCC Financing Statement

3. DIRECT PARTY / GRANTOR Names and Addresses - Required by ORS 205.234(1)(b)
for Mortgages/Liens list Borrower/Debtor

Borrower Name & Address: **JERRY J. PEACORE, 13751 HILL RD, KLAMATH FALLS, OR 97603**

Borrower Name & Address: **MARALEA A. PEACORE, ,**

Borrower Name & Address: **A+ LAND COMPANY, LLC, AN OREGON LIMITED LIABILITY COMPANY,
13751 HILL RD, KLAMATH FALLS, OR 97603**

4. INDIRECT PARTY / GRANTEE Names and Addresses - Required by ORS 205.234(1)(b)
for Mortgages/Liens list Beneficiary/Lender/Creditor

Beneficiary Name & Address: **NORTHWEST FARM CREDIT SERVICES, 300 KLAMATH AVE., STE 200
P.O. BOX 148, KLAMATH FALLS, OR 97601**

**5. For an instrument conveying or contracting to convey fee title, the information required by ORS 93.260:
UNTIL A CHANGE IS REQUESTED, ALL TAX STATEMENTS SHALL BE SENT TO**

Name: **JERRY J. PEACORE**

Address: **13751 HILL RD**

City, ST Zip: **KLAMATH FALLS, OR 97603**

6. TAX ACCOUNT NUMBER OF THE PROPERTY - Required by ORS 312.125(4)(b)(B)

47 PM

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Northwest Farm Credit Services, FLCA
300 Klamath Avenue, Suite 200
PO Box 148
Klamath Falls, OR 97601

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
	Peacore		Jerry	J	
1c. MAILING ADDRESS			CITY	STATE	POSTAL CODE COUNTRY
13751 Hill Rd			Klamath Falls	OR	97603 USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID.#, if any <input checked="" type="checkbox"/> NONE	

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
	Peacore		Maralea	A	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE COUNTRY
13751 Hill Rd			Klamath Falls	OR	97603 USA
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID.#, if any <input checked="" type="checkbox"/> NONE	

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE or ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME					
Northwest Farm Credit Services, FLCA					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE COUNTRY
300 Klamath Avenue, Suite 200, PO Box 148			Klamath Falls	OR	97601 USA

4. This FINANCING STATEMENT covers the following collateral: **All now owned or hereafter acquired collateral described herein**, including, without limitation the types or items of collateral described herein and inventory, accounts, general intangibles, and products and proceeds of collateral, and including:

All irrigation equipment, which are or will become fixtures, now owned and used, in whole or in part to irrigate the debtors' property and located on property owned by Born Properties, a partnership described in Addendum:

THIS FILING IS A FIXTURE FILING TO BE FILED FOR RECORD IN THE REAL ESTATE RECORDS.

5. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> LESSOR/LESSEE <input type="checkbox"/> COSIGNEE/COSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG LIEN <input type="checkbox"/> NON UCC FILING					
6. x This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]			7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2 [ADDITIONAL FEE] [optional]		
8. OPTIONAL FILER REFERENCE DATA					

Financing Statement 075207-442-999-99

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

OR

9a. ORGANIZATION'S NAME

9b. INDIVIDUAL'S LAST NAME

Peacore

FIRST NAME

Jerry

MIDDLE NAME, SUFFIX

J

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME – insert only one name (11a or 11b) – do not abbreviate or combine names

OR

11a. ORGANIZATION'S NAME

A+ Land Company, LLC

11b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

11c. MAILING ADDRESS

2800 Crosby Ave

CITY

Klamath Falls

STATE

OR

POSTAL CODE

97603

COUNTRY

USA

11d. SEE INSTRUCTIONS

ADD'L INFO RE
ORGANIZATION
DEBTOR

11e. TYPE OF ORGANIZATION

Limited Liability Company

11f. JURISDICTION OF ORGANIZATION

Oregon

11g. ORGANIZATIONAL I.D.#, if any

OR

317485-93

☐ NONE

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME – insert only one name (12a or 12b)

OR

12a. ORGANIZATION'S NAME

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

12c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☒ fixture filing.

14. Description of real estate:

Parcel 1 of Land Partition 47-08 being situate in the NW1/4SW1/4 of Section 28, E1/2 Section 29, NE1/4 Section 32 Township 39 South, Range 10 East of the Willamette Meridian, Klamath County, Oregon.

16. Additional collateral description:

15. Name and address of RECORD OWNER of above-described Real estate (if Debtor does not have a record interest):

Born Properties, a Partnership
4093 South Barrett Street
Salem, OR 97302

17. Check only if applicable and check only one box.

Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate

18. Check only if applicable and check only one box.

☐ Debtor is a TRANSMITTING UTILITY

☐ Filed in connection with a Manufactured-Home Transaction – effective 30 years

☐ Filed in connection with a Public-Finance Transaction – effective 30 years