UCC FINANCING STATEMENT

2013-009545 Klamath County, Oregon



08/20/2013 12:45:17 PM

Eng. \$42.00

FOLLOW INSTRUCTIONS		*	- '''	ree: \$42.0
A. NAME & PHONE OF CONTACT AT FILER (optional)		1		-
Phone: (800) 331-3282 Fax: (818) 662-4	141			
B. E-MAIL CONTACT AT FILER (optional)				
CLS-CTLS_Glendale_Customer_Service				
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 23	974 - SOLARCITY			
CT Lien Solutions P.O. Box 29071	39455950			
Glendale, CA 91209-9071	OROR			
,	FIXTURE :		- T	
	FIXTURE			
File with: Klamath,	OR	THE ABOVE SPACE IS F	OR FILING OFFICE US	SE ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1	ia or 1b) (use exact, full name; do not omit, π	nodify, or abbreviate any part of the Debto	r's name); if any part of the	Individual Debtor's
name will not fit in line 1b, leave all of item 1 blank, c	heck here and provide the Individual Del	otor information in item 10 of the Financing	Statement Addendum (Fo	orm UCC1Ad)
1a. ORGANIZATION'S NAME				
OR - HORESTON OF STREET				
16. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME ADDITIO	ADDITIONAL NAME(S)INITIAL(S)	
Harris	Ken			
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
5620 BARTLETT AVE	KLAMATH F	ALLS OR	97603	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2	2a or 2b) (use exact, full name; do not omit, n	nodify, or abbreviate any part of the Debto	r's name); if any part of the	Individual Debtor's
name will not fit in line 2b, leave all of item 2 blank, c	heck here and provide the Individual Def	otor information in item 10 of the Financing	g Statement Addendum (Fo	orm UCC1Ad)
2a. ORGANIZATION'S NAME				
		.		
. 2b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
		A/ N		
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE	of ASSIGNOR SECURED PARTY): Provide	e only one Secured Party name (3a or 3b)		
3a. ORGANIZATION'S NAME				
SOLARCITY CORPORATION			<i>y</i>	
3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
		1 1 1		
3c. MAILING ADDRESS	СПУ	STATE	POSTAL CODE	COUNTRY
3055 CLEARVIEW WAY	SAN MATE	D CA	94402	USA
4. COLLATERAL: This financing statement covers the f			1	
ALL EQUIPMENT LEASED FROM TIME TO		BTOR.		
		#		
		7		

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative.								
6a. Check only if applicable and check only one box:			6b. Check only if applicable and check only one box:					
Public-Finance Transaction	Manufactured-Home Transa	ction A Debtor is a Tran	smitting Utility	Agricultural Lien	Non-UCC Filing			
7. ALTERNATIVE DESIGNATION (if	applicable): 🔀 Lessee/Lessor	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensee/Licensor			
8. OPTIONAL FILER REFERENCE DATA:								
39455950 JB-976009-00 Harris, Ken			0400 Portland					

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME OR 9b. INDIVIDUAL'S SURNAME Harris FIRST PERSONAL NAME Ken ADDITIONAL NAME(S)INITIAL(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SVINITIAL(S) 10c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11. ADDITIONAL SECURED PARTY'S NAME <u>or</u> 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) SUFFIX COUNTRY POSTAL CODE 11c. MAILING ADDRESS CITY STATE 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) covers timber to be cut covers as-extracted collateral is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): Ken Harris A PARCEL OF LAND LOCATED IN THE STATE OF OR, COUNTY OF 5620 BARTLETT AVE KLAMATH, WITH A SITUS ADDRESS OF 5620 BARTLETT AVE, KLAMATH KLAMATH FALLS, OR 97603 FALLS OR 97603-8103 R006 CURRENTLY OWNED BY HARRIS KENNETH J & HARRIS SHELLY A HAVING A TAX ASSESSOR NUMBER OF R569389 AND BEING THE SAME PROPERTY MORE FULLY DESCRIBED AS FERNDALE, BLOCK 2, LOT 11.

SOLARCITY CORPORATION

File with: Klamath, OR

JB-976009-00 Harris, Ken 0400 Portland

17. MISCELLANEOUS: 39455950-OR-35 23974 - SOLARCITY