2014-010283
Klamath County, Oregon
10/03/2014 02:33:13 PM
Fee: \$47.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

2a ORGANIZATION'S NAME

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-52	294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 91936537 - 308510 Corporation Service Company 801 Adlai Stevenson Drive	٦
Springfield, IL 62703	Filed In: Oregon (Klamath)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

	1a. ORGANIZATION'S NAME Incident Catering Services, LLC				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	JAL NAME(S)/INITIAL(S)	SUFFIX
1c.	MAILING ADDRESS 1429 Avenue D, Suite 166	CITY	STATE	POSTAL CODE	COUNTRY
		Snohomish	WA	98290	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)					

FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	STATE		COUNTRY
	FIRST PERSONAL NAME		

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) [3a. ORGANIZATION'S NAME Columbia State Bank

OR					
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	IAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 2228 South 78th Street MS 6100		CITY	STATE	POSTAL CODE	COUNTRY
		-	14/4	00400	
		lacoma	WA	98409	USA

4. COLLATERAL: This financing statement covers the following collateral: APN: Map Tax Lot: 3908-012A0-02500-000 ID: 494370 Code No.: 004 ABV Legal: NE QTR NE QTR SEC 12, TWN 39 S, R 8 E, W.M.

The land and improvements together with all fixtures now or hereafter owned by Debtor and attached or affixed to the land or improvements. The real property located at: 2717 Orindale Road, Klamath Falls, OR 98601

Legal Description: See Exhibit "A" attached hereto and incorporated herein for full legal description.

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 Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable):	ver Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: :6206/1406003607	91936537

EXHIBIT A

LEGAL DESCRIPTION

A parcel of land lying in the NE ¼ NE ¼ Section 12, Township 39 South, Range 8 East of the Willamette Meridian, Klamath County, Oregon, and being more particularly described as follows: Beginning at a point at the Southwest corner of said NE ¼ NE ¼; thence East a distance of 30 feet; thence North along the Easterly right of way of a 60 foot road a distance of 660 feet to the true point of beginning; thence continuing North along said Easterly right of way a distance of 490 feet; thence East 234 feet; thence South 490 feet; thence West 234 feet to the true point of beginning.