

2015-008424

Klamath County, Oregon 07/29/2015 09:34:38 AM

Fee: \$67.00

UCC FINANCING STATEMENT

| POLLOW INSTRUCTIONS | | | | | |
|--|---|--|-------------------------------|--|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | | | | | |
| B. E-MAIL CONTACT AT FILER (optional) | | | | | |
| , | | | | | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | | | |
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| ¹ Umpqua Bank | ١ إ | | | | |
| PO Box 1580 | | | | | |
| Roseburg, OR 97470 | | | | | |
| 1 | 1 1 | | | | |
| | | THE ABOVE SPAC | E IS FO | R FILING OFFICE USE O | ONLY |
| 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact | | | | | |
| | ovide the Individual Debtor in | formation in item 10 of the Fina | incing Sta | etement Addendum (Form UC | C1Ad) |
| 1a. ORGANIZATION'S NAME | | | | | |
| OR 1b. INDIVIDUAL'S SURNAME | Lucar access | | | | January |
| TO. INDIVIDUAL'S SURNAME | FIRST PERSONAL N | IAME | ADDITIONAL NAME(S)/INITIAL(S) | | SUFFIX |
| Fernlund . | Carl | Raymond | | | |
| 1c. MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| P.O. Box 37 | Bonanza | | OR | 97623-0037 | USA |
| DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact name will not fit in line 2b, leave all of item 2 blank, check here and pro- | | dify, or abbreviate any part of the formation in Item 10 of the Fina | | | |
| 2a, ORGANIZATION'S NAME | | | | | |
| , | | | | | |
| OR 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL N | IAME | ADDITIO | VAL NAME(S)/INITIAL(S) | SUFFIX |
| Fernlund | Nancy | | Lynn | | |
| 2c. MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| P.O. Box 37 | Bonanza | | OR | 97623-0037 | USA |
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNORS | SECURED PARTY): Provide | only one Secured Party name | (Ša or 3b |) | |
| 3a. ORGANIZATION'S NAME | , | | | <u>, </u> | |
| Umpqua Bank | | | | | |
| OR 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | | ADDITIONAL NAME(S)/INITIAL(S) | | SUFFIX |
| | | | | | |
| 3c, MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| C/O Loan Support Services, PO Box 1580 | Roseburg | | OR | 97470 | USA |
| 4. COLLATERAL: This financing statement covers the following collateral: | <u> </u> | \ | | · · · · · · · · · · · · · · · · · · · | <u> </u> |
| 4 DEFINITIONS As used in this Calletonal | description 41 | falloudos words k | a a 4L | o mooningo stati | مر المامية |
| 1. DEFINITIONS. As used in this Collateral | | | | | |
| 1.1 Grantor and Debtor. The word "Granto | ir aiso includes | the Deptor name | ı ın a | ny related OCC i | -mancing |

- Statement.
- Real Property. The term "Real Property" means the property at 11443 Buesing Road, Klamath Falls, OR 97603 more particularly described below, including all of Grantor's rights of ingress and egress to the Real Property: See attached Exhibit "A"
- 1.3 Improvements. The word "Improvements" means all buildings, structures, fixtures and other improvements of every kind and nature now or hereafter located on or about the Real Property.
- Premises. The word "Premises" means the Real Property and the Improvements.

| (Continued on attached Financing Statement Addendum) | |
|--|--|
| 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): Lessee/Lessor Consignee/Consignor Seller/Buy | ver Bailee/Bailor Licensee/Licensor |
| 8. OPTIONAL FILER REFERENCE DATA: | |
| 070046742 | |

| FOLLOW INSTRUCTIONS | | | | | | |
|---|--|-------------------------|--|-------------------------------------|---|---|
| NAME OF FIRST DEBTOR: Same as line 1a or 1b on Finance because Individual Debtor name did not fit, check here | cing Statement; if line 1b was le | eft blank | | • | | |
| 9a. ORGANIZATION'S NAME | service | | | | | |
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| OR | | | | | | |
| 9b. INDIVIDUAL'S SURNAME | | l | | | | |
| Fernlund FIRST PERSONAL NAME | | | | | | |
| Carl | | <u>l</u> | | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | | SUFFIX | | | | |
| Raymond | | | THE ABOVE SPA | CE IS EOD EI | I ING OFFICE I | ISE ONLY |
| 0. DEBTOR'S NAME: Provide (10a or 10b) only one additional | I Debtor name or Debtor name | that did not fit in lin | | | W | |
| do not omit, modify, or abbreviate any part of the Debtor's name | | | | | , (| , |
| 10a. ORGANIZATION'S NAME | | | | | · · · · · · · · · · · · · · · · · · · | |
| DR | | | | | | |
| 10b. INDIVIDUAL'S SURNAME | | | | | | |
| INDIVIDUALIO SIDOT DEDOCALA MANG | | | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | | | | |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | | | | | SUFFIX |
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| Dc. MAILING ADDRESS | CITY | | STA | TE POSTAL (| CODE | COUNTRY |
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| 11b. INDIVIQUAL'S SURNAME | FIRST PERS | SONAL NAME | ADD | ITIONAL NAME | (S)/INITIAL(S) | SUFFIX |
| | | w.a. | | | | |
| c. MAILING ADDRESS | CITY | | STAT | TE POSTAL (| CODE | COUNTRY |
| 2. ADDITIONAL SPACE FOR ITEM 4 (Collateral): | | | | | | |
| PERSONAL PROPERTY. All pers Improvements, and all fixtures of every and/or used in connection with the oplimitation, the following: All accounts, chattel paper, contrights, general intangibles, payment in names of Grantor relating to the Premis | kind and nature reartion, ownership tracts for sale, dep ntangibles, letters | ow owned or en | and/or hereafte njoyment of the nts, documents | er acquire e Premise s, docum | ed and situ es includin ents of title | ated upo g, withou e, contra |
| 3. X This FINANCING STATEMENT is to be filed [for record] (or r | | ANCING STATEME | NT- | | | · |
| REAL ESTATE RECORDS (if applicable) | ' — | ers timber to be cut | covers as-extract | ted collateral | is filed as a | fixture filing |
| 5. Name and address of a RECORD OWNER of real estate describe | ed in item 16 16. Descripti | on of real estate: | | | <u></u> | |
| (if Debtor does not have a record interest): | | | | | | |
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| FOLLOW INSTRUCTIONS | | | | | | |
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| NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing S because Individual Debtor name did not fit, check here | Statement; if line 1b was left | blank | | | | |
| 9a. ORGANIZATION'S NAME | | | | | | |
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| | | j | | | | |
| OR 9b. INDIVIDUAL'S SURNAME | | | | | | |
| Fernlund | | | | | | |
| FIRST PERSONAL NAME | | | | | | |
| Carl | | MINISTER AND | | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | · S | SUFFIX | | | | |
| Raymond | | | THE ABOVE SP | ACE IS F | OR FILING OFFICE | JSE ONLY |
| DEBTOR'S NAME: Provide (10a or 10b) only one additional Deb do not omit, modify, or abbreviate any part of the Debtor's name) and ORGANIZATION'S NAME | | | ne 1b or 2b of the Finar | ncing State | ement (Form UCC1) (use | exact, full name; |
| OR 10b. INDIVIDUAL'S SURNAME | | | | | | NAME OF THE PERSON OF THE PERS |
| - | | | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | | | | |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | | | | | , Toursey |
| INDIVIDUAL & ADDITIONAL NAME(S)/INTERAL(S) | | | | | | SUFFIX |
| 10c, MAILING ADDRESS | CITY | | ST | ATE PO | OSTAL CODE | COUNTRY |
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| 11. ADDITIONAL SECURED PARTY'S NAME of 11a. ORGANIZATION'S NAME | ASSIGNOR SECURE | D PARTY'S | NAME: Provide only | one name | (11a or 11b) | |
| TIS. STOCKET THE TOTAL T | | | | | | |
| OR 11b. INDIVIDUAL'S SURNAME | FIRST PERSO | NAL NAME | AD | DITIONAL | NAME(S)/INITIAL(S) | SUFFIX |
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| 11c. MAILING ADDRESS | CITY | | ST. | ATE PO | OSTAL CODE | COUNTRY |
| 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): | | | | | | |
| 2.2 All equipment, inventory, furnish maintenance or service equipment and ot relating to the Premises; 2.3 All warranties, licenses, franchises, construction contracts relating to the Prer 2.4 All commercial tort claims with res and awards now or hereafter accruing to t | her raw material , plats, as-built p mises or Grantor pect to the Prem he benefit of Gra | s or supp lans, appr 's busines nises and antor and/ | lies, compone ovals, permits ss operations other legal an or the Premis | ent pa s, drav on thad equ | rts and work ir wings, specific e Premises; | n progress |
| 13. X This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable) | | ICING STATEME | [] | | | |
| Name and address of a RECORD OWNER of real estate described in il (if Debtor does not have a record interest): | | timber to be cut of real estate: | covers as-extra | cted colla | teral is filed as a | fixture filing |
| (ii pebita does not have a record interest). | | | | | | |
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| 17. MISCELLANEOUS: | | | | | | |
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| FOLLOW INSTRUCTIONS | | | | |
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| 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Finance | cing Statement; if line 1b was left blank |] | | |
| because Individual Debtor name did not fit, check here | | • | | |
| 9a. ORGANIZATION S NAIME | | | | |
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| | | | | |
| OR 9b. INDIVIDUAL'S SURNAME | | | | |
| | | | | |
| Fernlund | | | | |
| FIRST PERSONAL NAME | | , | | |
| Carl | | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX . | | | |
| Raymond | | THE ABOVE SPACE | IS FOR FILING OFFICE | USE ONLY |
| 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional | I 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 | | | | |
| 10a. ORGANIZATION'S NAME | | | | |
| | | | | |
| OR 10b. INDIVIDUAL'S SURNAME | | | | |
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| INDIVIDUAL'S FIRST PERSONAL NAME | | | | |
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| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | | | SUFFIX |
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| 10c. MAILING ADDRESS | ICITY | STATE | POSTAL CODE | COUNTRY |
| TOC. INDICATO ADDITEDS | Cit | SIAIE | FOSTAL CODE | COOMIC |
| OR 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
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| 11c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
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| 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): | valanment financing guar | ante indonesiae e | | |
| 2.5 All bonding, construction, dev | | | | |
| service, supply and warranty agreemen | | s, subcontracts, re | ports, studies, aç | greements |
| insurance policies and bonds relating to 2.6 All deposits, reserves, prepay | | robotos rofundo | and raturns of | monov o |
| 2.6 All deposits, reserves, prepays property paid to or deposited with an | | | | |
| | | | | rate utility |
| district or company, insurance compar | nes, or any other person in | connection with ti | ie Fremises. | |
| _ 3 INCOME FROM OPERATIONS_AI | | | es revenues ren | its, issues, |
| 13. X This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable) | recorded) in the 14. This FINANCING STATE | MENT: | | |
| | covers timber to be o | | collateral is filed as a | fixture filing |
| 15. Name and address of a RECORD OWNER of real estate describe (if Debtor does not have a record interest): | ed in item 16 16. Description of real estate | : : | | |
| In books one have a record interesty. | | | | |
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| 17. MISCELLANEOUS; | | | | |

| FOLLOW INSTRUCTIONS | | | | | |
|--|---|------------------|------------------|--|--------------|
| NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if because Individual Debtor name did not fit, check here | fline 1b was left blank | | | | |
| 9a. ORGANIZATION'S NAME | | | | | |
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| OR CO. DISPUSING SURVIVA | | | | | |
| 90. INDIVIDUAL'S SURNAME | | | | | |
| Fernlund FIRST PERSONAL NAME | | | | | |
| Carl | | | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | | | | |
| Raymond | r | THE ABOVE S | PACE | S FOR FILING OFFICE U | JSE ONLY |
| 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name of do not omit, modify, or abbreviate any part of the Debtor's name) and enter the n | | | | | |
| 10a, ORGANIZATION'S NAME | | | | | <u> </u> |
| OR 10b. INDIVIDUAL'S SURNAME | | | um a | • | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | | | |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | 10 70 70 70 70 70 70 70 70 70 70 70 70 70 | | | | SUFFIX |
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| 10c. MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| 11. ADDITIONAL SECURED PARTY'S NAME or ASSIGN | OR SECURED PARTY'S | NAME: Provide on | ly <u>one</u> na | me (11a or 11b) | <u>l</u> |
| 11a. ORGANIZATION'S NAME | | | | ······································ | |
| OR JOHN DOWN ON THE WAR | | | | | 1 |
| 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| 11c. MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| 40 ADDITIONAL ORACE FOR ITEM ((O. II.) | | | | | |
| 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): profits, accounts, accounts receivable, security | denocite rent der | nosite dener | al inta | ngibles contrac | t rights or |
| any other revenues related to the Premises or g | enerated from ope | rations cond | ucted | on the Premises | s, whether |
| now or hereafter existing and whether character | ized as being deriv | ed from real | or pe | rsonal property, | including, |
| without limitation, income from inventory sales, | tenant or guest of | cupancy of t | he Pr | emises, persona | l services, |
| amenities, concessions, vendors, food and bar s | ervices; whether a | ny of the fore | going | g is owned now o | r acquired |
| later; all accessions, additions, replacements, a | nd substitutions re | elating to any | ot tr | ie toregoing; aii i | recoras of |
| any kind relating to any of the foregoing. | 14.4 | | | • | |
| 13. X This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) | 14. This FINANCING STATE | r | | | Entres Clien |
| 15. Name and address of a RECORD OWNER of real estate described in item 16 | 16. Description of real estate: | | xtracteo c | ollateral is filed as a | nxture niing |
| (if Debtor does not have a record interest): | · | | | • | |
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| 17. MISCELLANEOUS: | | | | | ··· |

File No.: 44046AM

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EXHIBIT "A" LEGAL DESCRIPTION

All that part of the N1/2 SE1/4 of Section 33, Township 40 South, Range 10 East of the Willamette Meridian, Klamath County, Oregon, lying North of the U.S.R.S. "C" Canal.

AND ALSO THE FOLLOWING PARCEL:

Beginning at the intersection of the West boundary of the SE1/4 of Section 33 and the South boundary of U.S.R.S. "C" Canal; thence South, along said West boundary, 296.0 feet; thence South 88 degrees 26' East, along an existing fence line, 416.2 feet; thence leaving said fence, North 72 degrees 18' East 591 feet, more or less to the South boundary of the U.S.R.S. "C" Canal; thence Northwesterly along said Canal boundary to the point of beginning.

TOGETHER WITH that portion of the NE1/4 of the SW1/4 of Section 33, Township 40 South Range 10 East of the Willamette Meridian, Klamath County, Oregon, lying North and East of the East line of the U.S.B.R. "C" Canal.

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