2016-003871
Klamath County, Oregon
04/18/2016 02:04:08 PM
Fee: \$47.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS		
A. NAME & PHONE OF CONTACT AT FILER (optional)		
Darlene G 541-608-8921		
B. E-MAIL CONTACT AT FILER (optional)		
darleneg@peoplesbankofcommerce.com		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		
	—	
People's Bank of Commerce		
1311 E. Barnett Road		
Medford, OR 97504		
	T	
]	

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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

1	818 E McAndrews Rd	Medford	OR	97504	
1c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ŰŔ	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	VAL NAME(S)/INITIAL(S)	SUFFIX
ÓR	Dan Mollanan Real Estate Inc				

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)

2a.	ORGANIZATION'S NA	ME

OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY USA

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

People's Bank of Commerce

OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
750 Biddle Rd	Medford	OR	97504	USA

4. COLLATERAL: This financing statement covers the following collateral:

US Department of Agriculture Forest Service Term Special Use Permit for Recreation Residences Authority: Act of March 4, 1915, 16 U.S.C. 497; Permit issued to Dan Mollahan Real Estate Inc, dated , Auth ID: KLA213, Expiration Date 12/31/2028, Use Code 123, 931 covering .5 acres, hereinafter referred to as "the permit area" and described as:

(1) Lot V-04 of the LAKE OF THE WOODS tract, a plat of which is on file in the office of the Forest Supervisor; OR Sec. 14, T. 37 S., R. 5 E., WILLAMETTE MERIDIAN as shown on the map in the office of the Forest Supervisor,

Consignee/Consignor

Seller/Buyer

OR

(2) Sec. 14, T.37 S., R. 5 E., WILLAMETTE MERIDIAN as shown on the map.

(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 <u>only</u> if applicable and check <u>only</u> 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

Bailee/Bailor

Licensee/Licensor

UCC FINANCING STATEMENT ADDENDUM

ecause Individual Debtor name did not fit, check here	ncing Statement; if line 1b was left blank			
9a. ORGANIZATION'S NAME				
Dan Mollahan Real Estate Inc				
9b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
		THE ABOVE SPACE	IS FOR FILING OFFICE	USE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only one addition	al Debtor name or Debtor name that did not fit	t in line 1b or 2b of the Financing	Statement (Form UCC1) (u	e exact, full na
do not omit, modify, or abbreviate any part of the Debtor's nam				
10a. ORGANIZATION'S NAME				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ADDITIONAL SECURED PARTY'S NAME or	ASSIGNOR SECURED PART	Y'S NAME: Provide only one n	ame (11a or 11b)	
11a. ORGANIZATION'S NAME			1	
·				+ 4 14
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
MALING ADDRESS		STATE	POSTAL CODE	COUNTRY

LOW V-04; whether any of the foregoing is owned now or acquired later and wherever located; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds.)

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 (if Debtor does not have a record interest):	16. Description of real estate:

17. MISCELLANEOUS: