

RECORDING COVER SHEET

ORS 205.234

This cover sheet has been prepared by:

2016-004942

Klamath County, Oregon

05/12/2016 02:17:00 PM

Fee: \$52.00

AMERITITLE

Any error in this cover sheet DOES NOT affect the transaction(s) contained in the instrument itself.

Reference: 97316am

Please print or type information.

1. AFTER RECORDING RETURN TO –

Required by ORS 205.180(4) & 205.238:

Name: Amerititle Contract ServicingAddress: 300 Klamath Ave.City, ST Zip: Klamath Falls, OR 97601**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 instrument:

Document Title(s): UCC Financing statement**3. DIRECT PARTY / GRANTOR Names and Addresses – Required by ORS 205.234(1)(b)**

for Conveyances list Seller; for Mortgages/Liens list Borrower/Debtor

Grantor Name & Address: Angeline Lacy, 716 South Pacific Hwy, Talent, OR 97540

Grantor Name & Address: _____

Grantor Name & Address: _____

Grantor Name & Address: _____

4. INDIRECT PARTY / GRANTEE Names and Addresses – Required by ORS 205.234(1)(b)

for Conveyances list Buyer; for Mortgages/Liens list Beneficiary/Lender/Creditor

Grantee Name & Address: Lloyd N. Gass 1996 Revocable Living Trust, 4701 Sunset Ridge Rd,
Klamath Falls, OR 97601

Grantee Name & Address: _____

Grantee Name & Address: _____

Grantee Name & Address: _____

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
THE FOLLOWING ADDRESS:**Name: Angeline LacyAddress: 716 South Pacific HwyCity, ST Zip: Talent, OR 97540**6. TRUE AND ACTUAL CONSIDERATION – Required by ORS 93.030 for an instrument conveying or contracting to convey fee title or any memorandum of such instrument:**\$ 0.00**7. TAX ACCOUNT NUMBER OF THE PROPERTY if the instrument creates a lien or other interest that could be subject to tax foreclosure. – Required by ORS 312.125(4)(b)(B)**

Tax Acct. No.: _____

UCC FINANCING STATEMENT**FOLLOW INSTRUCTIONS****A. NAME & PHONE OF CONTACT AT FILER [optional]**

Bradford J. Aspell (541-883-7754)

B. E-MAIL CONTACT AT FILER [optional]

baspell@aspellhenderson.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Bradford J. Aspell
Aspell, Henderson & Associates
122 South Fifth Street
Klamath Falls, OR 97601

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

OR

1b. INDIVIDUAL'S SURNAME

Lacy

FIRST PERSONAL NAME

Angeline

ADDITIONAL NAME(S)/INITIAL(S)**SUFFIX****1c. MAILING ADDRESS**

716 South Pacific Highway

CITY

Talent

STATE

OR

POSTAL CODE

97540

COUNTRY

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)

2a. ORGANIZATION'S NAME

OR

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

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE or ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME

Lloyd N. Gass Trust under instrument dated September 17, 1996 as amended and re-stated January 4, 2008

OR

3b. INDIVIDUAL'S SURNAME**FIRST PERSONAL NAME****ADDITIONAL NAME(S)/INITIAL(S)****SUFFIX****3c. MAILING ADDRESS**

4701 Sunset Ridge Road

CITY

Klamath Falls

STATE

OR

POSTAL CODE

97601

COUNTRY

USA

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

All right, title and interest in and to that certain Term Special-Use Permit issued by USDA-Forest Service, Klamath Ranger District Fremont-Winema National Forest authorizing the occupancy and use of Block G, Lot 3, Lake of the Woods Recreation Unit, according to the official plat on file in the office of the Klamath Ranger District Fremont-Winema National Forest, Klamath County, Oregon, together with all rights to the surrender, and re-issuance of that certain Term Special-Use Permit authorizing occupancy of the described parcel, the right or interest in and to improvements located at Block G, Lot 3, Lake of the Woods Recreation Unit, according to the official plat on file in the office of the Klamath Ranger District Fremont-Winema National Forest, Klamath County, Oregon but not limited to renovations, remodels, successions, or new construction thereon.

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

6. Check only if applicable and check only one box:

☐

Public-Finance Transaction

☐

A Debtor is a Transmitting Utility

7. **ALTERNATIVE DESIGNATION** (if applicable):

☐

Lessee/Lessor

☐

Consignee/Consignor

☐

Seller/Buyer

☐

Bailee/Bailor

☐

Licensee/Licensor

8. **OPTIONAL FILER REFERENCE DATA**

Instructions for UCC Financing Statement (Form UCC1)

Please type or laser-print this form. Be sure it is completely legible. Read and follow all Instructions, especially Instruction 1; use of the correct name for the Debtor is crucial. Fill in form very carefully; mistakes may have important legal consequences. If you have questions, consult your attorney. The filing office cannot give legal advice.

When properly completed, send Filing Office Copy, with required \$15.00 fee to Secretary of State Corporation Division/UCC Section 255 Capitol St. NE, Ste. 151 Salem, Oregon 97310. **Rejected filings are subject to the non-refundable processing fee.**

If you need to use attachments, you are encouraged to use either Addendum (Form UCC1 Ad) or Additional Party (Form UCC1AP).

ITEM INSTRUCTIONS

- A. and B. To assist filing offices that might wish to communicate with filer, filer may provide information in item A and item B. These items are optional.
- C. Complete item C if filer desires an acknowledgment sent to them.

1. **Debtor's name.** Carefully review applicable statutory guidance about providing the debtor's name. Enter only one Debtor name in item 1 - either an organization's name (1a) or an individual's name (1b). If any part of the Individual Debtor's name will not fit in line 1b, check the box in item 1, leave all of item 1 blank, check the box in item 9 of the Financing Statement Addendum (Form UCC1Ad) and enter the Individual Debtor name in item 10 of the Financing Statement Addendum (Form UCC1Ad). Enter Debtor's correct name. Do not abbreviate words that are not already abbreviated in the Debtor's name. If a portion of the Debtor's name consists of only an initial or an abbreviation rather than a full word, enter only the abbreviation or the initial. If the collateral is held in a trust and the Debtor name is the name of the trust, enter trust name in the Organization's Name box in item 1a.
- 1a. **Organization Debtor Name.** "Organization Name" means the name of an entity that is not a natural person. A sole proprietorship is not an organization, even if the individual proprietor does business under a trade name. If Debtor is a registered organization (e.g., corporation, limited partnership, limited liability company), it is advisable to examine Debtor's current filed public organic records to determine Debtor's correct name. Trade name is insufficient. If a corporate ending (e.g., corporation, limited partnership, limited liability company) is part of the Debtor's name, it must be included. Do not use words that are not part of the Debtor's name.
- 1b. **Individual Debtor Name.** "Individual Name" means the name of a natural person; this includes the name of an individual doing business as a sole proprietorship, whether or not operating under a trade name. The term includes the name of a decedent where collateral is being administered by a personal representative of the decedent. The term does not include the name of an entity, even if it contains, as part of the entity's name, the name of an individual. Prefixes (e.g., Mr., Mrs., Ms.) and titles (e.g., M.D.) are generally not part of an individual name. Indications of lineage (e.g., Jr., Sr., III) generally are not part of the individual's name, but may be entered in the Suffix box. Enter individual Debtor's surname (family name) in Individual's Surname box, first personal name in First Personal Name box, and all additional names in Additional Name(s)/Initial(s) box.

If a Debtor's name consists of only a single word, enter that word in Individual's Surname box and leave other boxes blank.

For both organization and individual Debtors. Do not use Debtor's trade name, DBA, AKA, FKA, division name, etc. in place of or combined with Debtor's correct name; filer may add such other names as additional Debtors if desired (but this is neither required nor recommended).

- 1c. Enter a mailing address for the Debtor named in item 1a or 1b.
2. **Additional Debtor's name.** If an additional Debtor is included, complete item 2, determined and formatted per Instruction 1. For additional Debtors, attach either Addendum (Form UCC1Ad) or Additional Party (Form UCC1AP) and follow Instruction 1 for determining and formatting additional names.
3. **Secured Party's name.** Enter name and mailing address for Secured Party or Assignee who will be the Secured Party of record. For additional Secured Parties, attach either Addendum (Form UCC1Ad) or Additional Party (Form UCC1AP). If there has been a full assignment of the initial Secured Party's right to be Secured Party of record before filing this form, either (1) enter Assignor Secured Party's name and mailing address in item 3 of this form and file an Amendment (Form UCC3) [see item 5 of that form]; or (2) enter Assignee's name and mailing address in item 3 of this form and, if desired, also attach Addendum (Form UCC1Ad) giving Assignor Secured Party's name and mailing address in item 11.
4. **Collateral.** Use item 4 to indicate the collateral covered by this financing statement. If space in item 4 is insufficient, continue the collateral description in item 12 of the Addendum (Form UCC1Ad) or attach additional page(s) and incorporate by reference in item 12 (e.g., See Exhibit A).
Do not include social security numbers or other personally identifiable information.

Note: If this financing statement covers timber to be cut, covers as-extracted collateral, and/or is filed as a fixture filing, attach Addendum (Form UCC1Ad) and complete the required information in items 13, 14, 15, and 16.

5. If collateral is held in a trust or being administered by a decedent's personal representative, check the appropriate box in item 5. If more than one Debtor has an interest in the described collateral and the check box does not apply to the interest of all Debtors, the filer should consider filing a separate Financing Statement (Form UCC1) for each Debtor.
6. If this financing statement relates to a Public-Finance Transaction, or a Debtor is a Transmitting Utility, check the appropriate box in item 6a. If a Debtor is a Transmitting Utility and the initial financing statement is filed in connection with a Public-Finance Transaction, check only that a Debtor is a Transmitting Utility.
7. **Alternative Designation.** If filer desires (at filer's option) to use the designations lessee and lessor, consignee and consignor, seller and buyer (such as in the case of the sale of a payment intangible, promissory note, account or chattel paper), bailee and bailor, or licensee and licensor instead of Debtor and Secured Party, check the appropriate box in item 7.
8. **Optional Filer Reference Data.** This item is optional and is for filer's use only. For filer's convenience of reference, filer may enter in item 8 any identifying information that filer may find useful. Do not include social security numbers or other personally identifiable information.