2017-001484

Klamath County, Oregon

02/13/2017 08:38:01 AM

			Fee: \$47.00	
		•		
UCC FINANCING STATEMENT				
FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER [optional] Rowena Chase (541) 883-6924 Ext. 108				
B. E-MAIL CONTACT AT FILER [optional]				
rowena.chase@or.usda.gov				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
	¬ !			
UNISEARCH	I I			
325 13 th ST NE STE 404, Salem, OR 97301-2294 Acct # IDY 7 & pgs 2				
L_	THE AROVE SD	ACE IS EC	R FILING OFFICE USE	E ONLY
1. DEBTOR'S NAME - Provide only one Debtor name (1a or 1b) (use exact, fu				
name will not fit in line 1b, leave all of item 1 blank, check here and prov	ide the Individual Debtor information in item 10 of the F	inancing Sta	tement Addendum (Form U	CC1Ad)
18. ORGANIZATION'S NAME TALLY HO FARMS				
OR 15. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
	THOU ENGOVAE MANGE	ADDITION	AC NAME(S/INITIAL(S)	JUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
PO BOX 830	MERRILL	OR	97633	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 na	me); if any part of the indivi	dual Debtor's
name will not fit in line 2b, leave all of item 1 blank, check here and prov 2a. ORGANIZATION'S NAME	ride the Individual Debtor information in item 10 of the F	inancing Sta	tement Addendum (Form U	ICC1Ad)
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	IAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
A OFFICIAL PROPERTY.				
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	URED PARTY): Provide only one Secured Party name	(3a or 3b)		
COMMODITY CREDIT CORPORATION				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	СПУ	STATE	POSTAL CODE	COUNTRY
2316 S 6TH STREET, SUITE C	KLAMATH FALLS	OR	97601	USA
4. COLLATERAL: This financing statement covers the following collateral:				
One 62"4" x 288"0" double wide white Beh	Ion/Toton Woot Potato Stor	ogo Di	ildina four on	d wollo
with framed openings. Two end walls with	framed energings internal f	aye Di	inding lour en	u walls
brackets for fans. 8' concrete wall, full perir	matter openings, internal is	an not	ise designed i	or cen
			00450040	
6 blade prop fans SN(s): P6106452077, P	6087546002, P6106452081	I, Po10	J6452U49,	
P6106452050, P6106452062				
5. Check only if applicable and check only one box: Collateral is held in a Tru	ust (see UCC1Ad, item 17 and instructions) be	ing administe	ered by a Decedent's Perso	nal Representative
Check <u>only</u> if applicable and check only one box:				
Public-Finance Transaction A Debtor is a Tra	nsmittina Utility			
		<u> </u>		
7. ALTERNATIVE DESIGNATION [if applicable]: Lessee/Lessor 8. OPTIONAL FILER REFERENCE DATA	Consignee/Consignor Seller/Buyer	Bailee	/Dallor Lic	ensee/Licensor
U. U. HUHAL FILER REFERENCE DATA				

USDA/FSA by: Rowena A. Chase

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS 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 TALLY HO FARMS OR 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 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(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE COUNTRY CITY 11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME OR 11b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS STATE POSTAL CODE COUNTRY CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 14. This FINANCING STATEMENT: This FINANCING STATEMENT is to be filed [for record] (or recorded) in the covers timber to be cut covers as-extracted collateral I is filled as a fixture filling REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of above-described real estate described in item 16 (if Debtor does not have a record interest): The SE1/4 SW 1/4 of Sec. 4, TWP 41S, JW FARMS PARTNERSHIP, ENTITY R12 EWM, Klamath County, Oregon, EXCEPT a 30' JOHN R. WALKER, INDIVIDUAL strip for road right of way across the South side WILLIAM WALKER, INDIVIDUAL thereof. PO BOX 830 MERRILL, OR 97633 17. MISCELLANEOUS: