

2018-012447

Klamath County, Oregon



10/11/2018 08:47:24 AM

Fee: \$82.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
Bridgette Almario 206.298.9394 x8903

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Salal Credit Union
 PO Box 75029
 Seattle, WA 98175-0029**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S LAST NAME: **TUCKER** FIRST NAME: **BARBARA** MIDDLE NAME: SUFFIX:

1c. MAILING ADDRESS: **PO BOX 2434** CITY: **LA PINE** STATE: **OR** POSTAL CODE: **97739** COUNTRY: **USA**

1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S LAST NAME: FIRST NAME: MIDDLE NAME: SUFFIX:

2c. MAILING ADDRESS: CITY: STATE: POSTAL CODE: COUNTRY:

2d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR(S)/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME: **Salal Credit Union**

OR

3b. INDIVIDUAL'S LAST NAME: FIRST NAME: MIDDLE NAME: SUFFIX:

3c. MAILING ADDRESS: **PO Box 75029** CITY: **Seattle** STATE: **WA** POSTAL CODE: **98175-0029** COUNTRY:

4. This FINANCING STATEMENT covers the following collateral:

CASUAL CUSTOM BATH WITH WALL SYSTEM, SOAP DISH, 2 PRAIRIE CORNER SHELVES, 12" GRAB BAR, 24" GRAB BAR, MOEN VALVE & TRIM KIT, SHOWER ROD, DRAIN, WALK IN TUB, WALL SYSTEM, WALK IN TUB EXTENSION, CHROME HARDWARE AS PER DA BELLA INVOICE 06/16/18

Alt. APN: 2310E36B05400

APN: R140225

Legal: Sun Forest Estates, Block 1, Lot 72, Ms X# 219598, Home Id 270389

County: Klamath, OR

144952 BIRCHWOOD DR LA PINE, OR 97739

FIXTURE FILING

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable] 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA