

2019-012889**Klamath County, Oregon**

11/04/2019 08:21:01 AM

Fee: \$87.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

CSC 1-800-858-5294

B. E-MAIL CONTACT AT FILER (optional)

SPRFiling@cscglobal.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

1720 50485

CSC
801 Adlai Stevenson Drive
Springfield, IL 62703Filed In: Oregon
(Klamath)

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

Jackman

FIRST PERSONAL NAME

Julia

ADDITIONAL NAME(S)/INITIAL(S)

C

SUFFIX

1c. MAILING ADDRESS 934 Pacific Ter

CITY
Klamath FallsSTATE
ORPOSTAL CODE
97601COUNTRY
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

Jackman

FIRST PERSONAL NAME

Robert

ADDITIONAL NAME(S)/INITIAL(S)

P

SUFFIX

2c. MAILING ADDRESS 934 Pacific Ter

CITY
Klamath FallsSTATE
ORPOSTAL CODE
97601COUNTRY
USA3. 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 Community 1st Credit Union

OR

3b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

3c. MAILING ADDRESS 929 Eastside Street SE

CITY
OlympiaSTATE
WAPOSTAL CODE
98501COUNTRY
USA

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

Perfection Purchase Money Security Interest in Fixture. Complete 5.8kW Solar system including 19 Trina 305-Watt energy modules 1 Solar Edge inverter and all equipment and components installed at 934 Pacific Ter Klamath Falls, OR 97601 Parcel:217269 MTL:3809-028BC-07400 Map Coord:38S-9E-28-NW-SW Situs Address:934 PACIFIC TER KLAMATH FALLS, OR 97601 Abbreviated Legal Address:HOT SPRINGS BLK-36 LOT-2 S28,T38S,R9E

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 Representative6a. Check only if applicable and check only one box:☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility6b. Check only if applicable and check only one box:☐ Agricultural Lien ☐ Non-UCC Filing7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

1720 50485

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. 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

OR

9b. INDIVIDUAL'S SURNAME

Jackman

FIRST PERSONAL NAME

Julia

ADDITIONAL NAME(S)/INITIAL(S)

C

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

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

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

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

☐ 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):

Julia C Jackman

Robert P Jackman

934 Pacific Ter

Klamath Falls, OR 97601

16. Description of real estate:

Perfection Purchase Money Security Interest in Fixture. Complete 5.8kW Solar system including 19 Trina 305-Watt energy modules 1 Solar Edge inverter and all equipment and components installed at 934 Pacific Ter Klamath Falls, OR 97601 Parcel:217269 MTL:3809-028BC-07400 Map Coord:38S-9E-28-NW-SW Situs Address:934 PACIFIC TER KLAMATH FALLS, OR 97601 Abbreviated Legal Address:HOT SPRINGS BLK-36 LOT-2 S28,T38S,R9E

17. MISCELLANEOUS: