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UCC FINANCING STATEMENT

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

FOLLOW INSTRUCTIONS

Record at the request of and when recorded return to: Loanpal, LLC

2020-003766 Klamath County, Oregon



03/30/2020 03:25:45 PM

Fee: \$87.00

B. E-MAIL CONTACT AT FILER (optional)			
filings@loanpalsupport.com			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	-	-	
_	<u> </u>		
Loanpal, LLC			
PO Box 4387			
Portland, OR 97208			
<u></u>			
	THE A	BOVE 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 abbrevial	te any part of the Debtor's name), if any part of the	Individual Debtor
	id provide the individual Debtor information in item	n 10 of the Financiπg Statement Addendum (Form	UCC1Ad)
1a. ORGANIZATION'S NAME		. \ \	
OR 16 INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	ISUFFIX
Justus	Glenn	ADDITIONAL NAME(S)INITIAE(S)	SUFFIX
IC. MAILING ADDRESS			
4803 Sayler St	CITY	STATE POSTAL CODE	COUNTRY
4603 Saylel St	Klamath Falls	OR 97603-9695	l OSA
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use name will not fit in line 2b, leave all of item 2 blank, check here are all 2a, ORGANIZATION'S NAME		n 10 of the Financing Statement Addendum (Form	
OR 26 INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	THO TELOUNA INNE	ADDITIONAL WARE(S)	JOFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
		S.I. 2 SS.II 2 SSS2	USA
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN	JOB SECURED DARRY). Provide and and Co.		
3a. ORGANIZATION'S NAME	IDR SECURED PARTY): Provide only one Secur	ed Party name (3a or 3b)	
Loanpal, LLC			
OR 36. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	, morrendone mane	TOTAL INVESTIGATION	301112
DC. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
8781 Sierra College Boulevard	Roseville	CA 95746	USA
4. COLLATERAL: This financing statement covers the following collater		C/I	
All of the debtor's right, title and interest in the Phot	iovoltaic Solar Energy Equipment or F	inergy Storage/Battery Equipment (If a	ny), including

5. Check only if applicable and check only one box: Collateral is held in a Tri	ust (see UCC1Ad, item 17 and Instructions)	being administered by a Dec	edent's Personal Representative
6a. Chack only if applicable and check only one box:		6b. Check <u>only</u> if applicable	and check <u>only</u> one box:
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting Utility	Agricultural Lien	X Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor Selle	r/Buyer Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: Acct # 2014018438			_

but not limited to rooftop solar panels, solar roofing materials, wall mounted batteries, stand alone batteries, inverters, cables and wires, support brackets, roof mounted or ground mounted racking systems, related equipment, and additions or replacements of the same. In addition, the

security interest includes all warranties issued with respect to the referenced collateral.

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 9b. INDIVIDUAL'S SURNAME Justus FIRST PERSONAL NAME Glenn ADDITIONAL NAME(S)/INITIAL(S) 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 10s. ORGANIZATION'S NAME OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE COUNTRY ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11. ADDITIONAL SECURED PARTY'S NAME of 11a, ORGANIZATION'S NAME OR 115. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME SUFFIX 11c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral) 13. X 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 X is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): County of: KLAMATH Glenn Justus Address of Real Estate: 4803 Sayler St, Klamath Falls, OR, 97603-9695 APN: R880992 **EVERGREEN MEADOWS TRACT 1302, LOT 22**

UCC FINANCING STATEMENT ADDENDUM (Form UCC1Ad) (Rev. 04/20/11)

17. MISCELLANEOUS: