UCC FINANCING STATEMENT			Fee: \$92.00	
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)				
1809 64640	$\neg 1$			
CSC 801 Adlai Stevenson Drive				
Commercial II 62702	In: Oregon			
	(Klamath)			
4 DEDTODIS NAME: 0. H. A. D. H. A.			S FOR FILING OFFICE USE	
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full rame will not fit in line 1b, leave all of item 1 blank, check here and provide t	ame; do not omit, modify, or abbreviate ne Individual Debtor information in item			
1a. ORGANIZATION'S NAME			•	,
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADD	DITIONAL NAME(S)/INITIAL(S)	SUFFIX
Spencer	Michael	L		
1c. MAILING ADDRESS 34610 Sprague River Rd	сіту Sprague River	STA OI		COUNTRY
2 DERTOP'S NAME. Deside selving Debter some (2) or 2h / (see event full of		anu nest of the D		Individual Dahtaria
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full rename will not fit in line 2b, leave all of item 2 blank, check here and provide to	ame; do not omit, modify, or abbreviate ne Individual Debtor information in item			
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		DITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STA	ATE POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Provide only one Secure	ed Party name (3a	or 3b)	
3a. ORGANIZATION'S NAME Community 1st Credit Union	<u> </u>		3. 52,	
OD				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADD	DITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS PO Box 870	DuPont	STA W		USA
4. COLLATERAL: This financing statement covers the following collateral:				
4. COLLATERAL: This financing statement covers the following collateral: Perfection Purchase Money Security Interest In Fixtu	re. All Solar equipment i	ncluding bu	it not limited to the c	omplete
Solar system and all of its components installed at 3				
Alt Parcel: 3611E2600900 Situs Address: 34610 Spr				
Description: A portion of the SE 1/4 of Section 26, To Klamath County, Oregon, described as follows: Begi				
Section 26; thence from said point of beginning, Wes				
873 feet to a point; thence North 990 feet to the poin				
Instrument #2014-001707 Date: 02/27/2014		5		
5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	heing admi	inistered by a Decedent's Perso	nal Representative

A Debtor is a Transmitting Utility

Seller/Buyer

Consignee/Consignor

FILING OFFICE COPY — UCC FINANCING STATEMENT (Form UCC1) (Rev. 04/20/11)

Manufactured-Home Transaction

Lessee/Lessor

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

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA:

Public-Finance Transaction

1809 64640

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

Non-UCC Filing

Licensee/Licensor

Agricultural Lien

Bailee/Bailor

2020-005402

04/29/2020 08:49:23 AM

Klamath County, Oregon

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State	ement; if line 1b was left blank	1				
because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME						
OR 9b. INDIVIDUAL'S SURNAME						
Spencer						
FIRST PERSONAL NAME Michael						
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX					
L		THE ABOVE SPA	CE IS FOR FILING	OFFICE USE ONLY		
 DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor of do not omit, modify, or abbreviate any part of the Debtor's name) and entered and one of the Debtor's name. 						
10a. ORGANIZATION'S NAME						
R 10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX		
IC. MAILING ADDRESS	CITY	STA	TE POSTAL CODE	E COUNTRY		
the control of the co	FIRST PERSONAL NAME	ADD	TE POSTAL CODE	, ,		
. ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
3. This FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable)		14. This FINANCING STATEMENT: covers timber to be cut				
5. Name and address of a RECORD OWNER of real estate described in item (if Debtor does not have a record interest): Michael L Spencer 34610 Sprague River Rd Sprague River, OR 97639	Perfection Purcha equipment including and all of its comp	e: se Money Securi ng but not limited conents installed a	ry Interest In F to the comple at 34610 Spra	Fixture. All Solar ete Solar system ague River Rd		
	3611E2600900 Si River, OR 97639 A SE 1/4 of Section Willamette Meridia	Sprague River, OR 97639 Parcel: R336988 Alt Parcel: 3611E2600900 Situs Address: 34610 Sprague River Rd, Sprague River, OR 97639 Abbreviated Legal Description: A portion of the SE 1/4 of Section 26, Township 36 South, Range 11 East of the Willamette Meridian, Klamath County, Oregon, described as follows: Beginning at a point 873 feet West from the East quarter				
7. MISCELLANEOUS:						

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; because Individual Debtor name did not fit, check here	if line 1b was le	eft blank				
9a. ORGANIZATION'S NAME						
DR at the National College and the College and						
9b. INDIVIDUAL'S SURNAME Spencer						
FIRST PERSONAL NAME						
Michael ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
L					IS FOR FILING OFF	
 DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name of do not omit, modify, or abbreviate any part of the Debtor's name) and enter the 			line 1b or 2b	of the Financing	Statement (Form UCC1) (use exact, full name
10a. ORGANIZATION'S NAME						
R 10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
DC. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
I. ADDITIONAL SECURED PARTY'S NAME or ASSIGN	IOR SECU	RED PARTY	'S NAME: F	Provide only one i	name (11a or 11b)	
11a. ORGANIZATION'S NAME	1011 0200	125 174111	O TO TIVILE. T	TOVIDE OTHY SITE I	iame (11a or 11b)	
R 11b. INDIVIDUAL'S SURNAME	FIRST PER:	SONAL NAME	ADDITIONAL NAME(S)/INIT			(S) SUFFIX
c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
3. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	e 14. This FIN	IANCING STATE	CING STATEMENT:			
5. Name and address of a RECORD OWNER of real estate described in item 16		ers timber to be tion of real estate		vers as-extracted	collateral is filed	d as a fixture filing
(if Debtor does not have a record interest):	West 87 East 87 beginni	73 feet to a 3 feet to a	point; the point; the mplete L	nence Sout ence North .egal Desci	n said point of I h 990 feet to a i 990 feet to the ription refer to S	point; thence point of
7. MISCELLANEOUS:						