FIRST PERSONA Scharlottie	modify, or abbreviate any part of the or information in item 10 of the Fina	ne Debtor' ancing Sta		dividual Debtor's
(Klamath) name; do not omit, he Individual Debte FIRST PERSONA Scharlottie	modify, or abbreviate any part of the or information in item 10 of the Fina	ne Debtor' ancing Sta	s name); if any part of the Ind	dividual Debtor's
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Scharlottie				
		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
mannaum		STATE OR	POSTAL CODE 97601	COUNTRY
			,	
FIRST PERSONA	AL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
Gerold		LW	, , , , , ,	
сітү Klamath Fa		STATE OR	POSTAL CODE 97601	COUNTRY
RED PARTY): Pro	ovide only one Secured Party name	(3a or 3b)	
TEIDOT DEDOON	AL NIAME	ADDITION	LAL NAME (O) (BUT (AL (O)	Toursen
			. , . , ,	SUFFIX
DuPont		STATE WA	98327	USA
311 Lawand nda Dr, Kla cording to t	da Dr Klamath Falls, C math Falls, OR 97601 he official plat thereof	R 976 Abbre on file	601 Parcel: R4973 eviated Legal Desc in the office of the	31 Alt cription: Lo e County
	Klamath Finame; do not omit, the Individual Debt Gerold CITY Klamath Finame Party): Proceeding to total pal Descript	In the Individual Debtor information in item 10 of the Final Pirist Personal NAME Gerold CITY Klamath Falls RED PARTY): Provide only one Secured Party name CITY DuPont Kure. All Solar equipment includir 311 Lawanda Dr Klamath Falls, Ornda Dr, Klamath Falls, Ornda Dr, Klamath Falls, Ornda Dr, Klamath Falls, Ornda Dr, Solar equipment includir 311 Lawanda Dr Klamath Falls, Ornda Dr, Klamath Falls, Ornda Dr, Klamath Falls, Ornda Dr, Klamath Falls, Ornda Dr, Solar equipment includir 311 Lawanda Dr Klamath Falls, Ornda Dr, Klamath Falls, O	RIAMBET PERSONAL NAME CITY CITY DuPont RIAMBET PERSONAL NAME CITY CITY CITY CITY DuPont CITY CITY CITY DuPont CITY CITY DuPont CITY CITY CITY DuPont CITY CITY CITY DuPont CITY CITY CITY CITY CITY CITY CITY CIT	Klamath Falls OR 97601

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

1982 35456

Non-UCC Filing

Licensee/Licensor

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

Agricultural Lien

Bailee/Bailor

2020-011623

09/14/2020 09:21:00 AM

Klamath County, Oregon

UCC FINANCING STATEMENT ADDENDUM

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statem	nent; if line 1b was left blank				
because Individual Debtor name did not fit, check here					
OR					
9b. INDIVIDUAL'S SURNAME Spence FIRST PERSONAL NAME					
Scharlottie ADDITIONAL NAME(S)/INITIAL(S) R	SUFFIX				
DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor na do not omit, modify, or abbreviate any part of the Debtor's name) and enter				IS FOR FILING OFFICE Statement (Form UCC1) (use	
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 ASS	IGNOR SECURED PARTY	S NAME: Provide or	nly <u>one</u> na	ame (11a or 11b)	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIC	NAL 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 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 1 (if Debtor does not have a record interest): Scharlottie R Spence Gerold L W Spence 5311 Lawanda Dr Klamath Falls, OR 97601		ese Money Second but not limit conents installed Parcel: R49733 11 Lawanda D Description: L , according to ty Clerk of Klai	curity ed to ed at 5 1 Alt r, Klai ot 19 the of	Interest - In Fixtur the complete Sola 311 Lawanda Dr Parcel: 3908E140 math Falls, OR 97 in Block 2 of TRA ficial plat thereof (County, Oregon. F	re. All Solar ar system Klamath C01300 '601 ACT 1002, on file in the
17. MISCELLANEOUS:					

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

because Individual Debtor name did not fit, check here	ng Statement; if line 1b was left blank			
9a. ORGANIZATION'S NAME				
DR OL INDIVIDUALIS SUDNAME				
9b. INDIVIDUAL'S SURNAME Spence				
FIRST PERSONAL NAME Scharlottie				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
R DEBTOR'S NAME: Provide (10a or 10b) only one additional I	Debtor name or Debtor name that did not fit in	THE ABOVE SPACE line 1b or 2b of the Financing S		
do not omit, modify, or abbreviate any part of the Debtor's name) a 10a. ORGANIZATION'S NAME				
R 10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTR
11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S) SUFFIX
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTR
. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				
S. INTERIOR ABOVES S. ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or record).	ecorded) in the 14. This FINANCING STATE		collateral ☑ is filed a	s a fixture filing
. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 	covers timber to be	cut covers as-extracted	collateral ☑ is filed a	