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)				
2042 92976	コ			
CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed	In: Oregon			
	(Klamath) THE ABOVE SE	PACE IS FO	R FILING OFFICE USE C	ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full to				
name will not fit in line 1b, leave all of item 1 blank, check here and provide to 1a. ORGANIZATION'S NAME	he Individual Debtor information in item 10 of the	Financing Sta	atement Addendum (Form UC	CC1Ad)
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Smith	William	P	TAL NAME (O)/INTTIAL(O)	JR.
1c. MAILING ADDRESS 10716 Misty Mountain Dr	CITY Keno	STATE	POSTAL CODE 97627	COUNTRY
a DEDTODIC NAME a sur a				
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full r name will not fit in line 2b, leave all of item 2 blank, check here and provide to	name; do not omit, modify, or abbreviate any part the Individual Debtor information in item 10 of the			
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Jones-Smith	Sharryn	R		
2c. MAILING ADDRESS 10716 Misty Mountain Dr	Keno	STATE	POSTAL CODE 97627	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Provide only one Secured Party n	ame (3a or 3b)	•
3a. ORGANIZATION'S NAME Community 1st Credit Union				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
35. HADIVIDUAL 3 SONNAME	THO TENSONAL NAME	ADDITIO	ALE NAME (S)/INTTIAL(S)	30111X
3c. MAILING ADDRESS PO Box 870	CITY DuPont	STATE WA	POSTAL CODE 98327	COUNTRY
4 COLLATERAL THE STATE OF THE S				
4. COLLATERAL: This financing statement covers the following collateral: Perfection: Purchase Money Security Interest - In Fix Solar system and all of its components installed at 1 Parcel: 3907E36D05500 Situs Address: 10716 Misty 2 of Tract 1321, First Addition to Misty Mountain, acc Clerk, Klamath County, Oregon. For Complete Lega 12/29/2017	0716 Misty Mountain Dr Keno, / Mountain Dr, Keno, OR 9762 cording to the official plat there	OR 9762 7 Abbrev of on file	27 Parcel: R88248 riated Legal Descri in the office of the	0 Alt ption: Lot County
5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	eing administer	red by a Decedent's Personal	l Representative
6a. Check only if applicable and check only one box:			f applicable and check <u>only</u> o	
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting Utility	Agricult	ural Lien Non-UCC	Filing

Consignee/Consignor

Seller/Buyer

Bailee/Bailor

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

Lessee/Lessor

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA:

Licensee/Licensor

2021-000366

01/11/2021 09:51:01 AM

Klamath County, Oregon

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS						
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; in because Individual Debtor name did not fit, check here	f line 1b was le	ft blank				
9a. ORGANIZATION'S NAME						
OR 9b. INDIVIDUAL'S SURNAME						
Smith						
FIRST PERSONAL NAME						
William						
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX JR.				
DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor name of do not omit, modify, or abbreviate any part of the Debtor's name) and enter the name of the name		that did not fit in			IS FOR FILING OFFICE Statement (Form UCC1) (use	
10a. ORGANIZATION'S NAME	3					
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
	OR SECUE	RED PARTY'	S NAME: Provide o	nly <u>one</u> na	ame (11a or 11b)	
11a. ORGANIZATION'S NAME						
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERS	SONAL 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 the REAL ESTATE RECORDS (if applicable)	14. This FIN	ANCING STATE	MENT:			
15. Name and address of a RECORD OWNER of real estate described in item 16		ers timber to be o		extracted	collateral 🖊 is filed as a	a fixture filing
(if Debtor does not have a record interest): William P Smith JR.	1			curity	Interest - In Fixtur	e. All Solar
Sharryn R Jones Smith	equipme	ent includir	ng but not limi	ted to	the complete Sola	ar system
10716 Misty Mountain Dr					0716 Misty Moun Parcel: 3907E36l	
Keno, OR 97627					Dr, Keno, OR 976	
					of Tract 1321, Firs	
					al plat thereof on ounty, Oregon. Fo	
					nent #2017-01477	
17. MISCELLANEOUS:						
17. WIIGOLLEANLOUG.						

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

O- ODOANIZATIONIO *****					
9a. ORGANIZATION'S NAME					
9b. INDIVIDUAL'S SURNAME					
Smith					
FIRST PERSONAL NAME William					
ADDITIONAL NAME(S)/INITIAL(S) P		JR.	THE ABOVE SPACE	IS FOR FILING OFFI	CE USE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only one additional do not omit, modify, or abbreviate any part of the Debtor's name)			ne 1b or 2b of the Financing \$	Statement (Form UCC1)	(use exact, full na
10a. ORGANIZATION'S NAME					
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
:. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTR
ADDITIONAL SECURED PARTY'S NAME or [11a. ORGANIZATION'S NAME	ASSIGNOR SECUI	RED PARTY'S	NAME: Provide only one n	ame (11a or 11b)	<u> </u>
11b. INDIVIDUAL'S SURNAME	FIRST PER	SONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S	S) SUFFIX
c. MAILING ADDRESS	FIRST PER	SONAL NAME	STATE	POSTAL CODE	
e. MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral):	CITY	SONAL NAME			
:. MAILING ADDRESS	corded) in the 14. This FIN	SONAL NAME VANCING STATEME Vers timber to be cut	STATE STATE	POSTAL CODE	S) SUFFIX COUNTRY
. MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or recent leads to be seen	corded) in the 14. This FIN cov	NANCING STATEME vers timber to be cut tion of real estate:	STATE STATE	POSTAL CODE	COUNTR
c. MAILING ADDRESS ADDITIONAL SPACE FOR ITEM 4 (Collateral):	corded) in the 14. This FIN cov	NANCING STATEME vers timber to be cut tion of real estate:	STATE STATE	POSTAL CODE	COUNTR