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)				
2079 47677	-			
CSC	1			
801 Adlai Stevenson Drive				
Springfield, IL 62703	Filed In: Oregon			
	(Klamath)			
	_		FOR FILING OFFICE U	
DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use a name will not fit in line 1b, leave all of item 1 blank, check here and		ify, or abbreviate any part of the Doormation in item 10 of the Financir		
1a. ORGANIZATION'S NAME				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	AME ADD	DITIONAL NAME(S)/INITIAL(S	S) SUFFIX
Downey	Joelene	Α	Α	
1c. MAILING ADDRESS 131 Sunrise St	сіту Midland	STA OI		COUNTRY
o DEDTODIO VIVIE				
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use e name will not fit in line 2b, leave all of item 2 blank, check here and		ity, or abbreviate any part of the Di ormation in item 10 of the Financir		
2a. ORGANIZATION'S NAME	•			
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	AME ADD	ADDITIONAL NAME(S)/INITIAL(S)	
2c. MAILING ADDRESS	CITY	STA	TE POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN	OR SECURED PARTY): Provide	only one Secured Party name (3a	or 3b)	'
3a. ORGANIZATION'S NAME Community 1st Credit Un	ion			
OR CLANDING DIAMAS	T			
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	AME ADD	DITIONAL NAME(S)/INITIAL(S	SUFFIX
3c. MAILING ADDRESS PO Box 870	CITY	STA	TE POSTAL CODE	COUNTRY
30. MAILING ADDITESS PO BOX 870	DuPont	W		USA
4. COLLATERAL: This financing statement covers the following collaters				
COLLATERAL: This financing statement covers the following collaters Perfection: Purchase Money Security Interest	- In Fixture. 1 Genera	ac battery and all Sola	ar equipment inclu	ding but not
limited to the complete Solar system and all of				
R503039 Alt Parcel: 3908E36DB01100 Situs A Description: Lots 16, 17, 18, 19, 20, 21, 22, 23				
thereof on file in the office of the County Clerk				
Main Street (now called Sunrise Street) which				
to Sale Instrument #2018-000044 Date: 01/02		2000110001101011101	mpioto Logai Doo	onpaon 10101

A Debtor is a Transmitting Utility

Seller/Buyer

Consignee/Consignor

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

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

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA:

Public-Finance Transaction

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)

Manufactured-Home Transaction

Lessee/Lessor

being administered by a Decedent's Personal Representative

Non-UCC Filing

Licensee/Licensor

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

Agricultural Lien

Bailee/Bailor

2021-004181

03/19/2021 03:52:00 PM

Klamath County, Oregon

UCC FINANCING STATEMENT ADDENDUM

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; i	if line 1b was left blank						
because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME							
9b. INDIVIDUAL'S SURNAME Downey FIRST PERSONAL NAME							
Joelene ADDITIONAL NAME(S)/INITIAL(S)	SUFFI	x					
A					S FOR FILING OFFIC		
 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 resulting Organization's NAME 			line 1b or 2b of the F	Financing S	tatement (Form UCC1) (u	ise exact, full 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	
11a. ORGANIZATION'S NAME	IOR SECURED F		S NAME: Provide	-			
11b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)			
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 file.					s 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): Joelene A Downey 131 Sunrise St Midland, OR 97634	Generac bat the complete 131 Sunrise 3908E36DB 97634 Abbre 22, 23, 24, 2 official plat th	-					
17. MISCELLANEOUS:							

UCC FINANCING STATEMENT ADDENDUM

OLLOW INSTRUCTIONS NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing	Statement; if line 1b was	left blank	1					
9a. ORGANIZATION'S NAME								
OR a market was supplied								
9b. INDIVIDUAL'S SURNAME								
Downey			1					
FIRST PERSONAL NAME Joelene								
		Tourny	4					
ADDITIONAL NAME(S)/INITIAL(S) A		SUFFIX						
							S FOR FILING OFFICE	
DEBTOR'S NAME: Provide (10a or 10b) only one additional De			n lin	e 1b or 2b of	the Financin	g St	atement (Form UCC1) (use	exact, full nam
do not omit, modify, or abbreviate any part of the Debtor's name) an 10a. ORGANIZATION'S NAME	d enter the mailing addre	ss in line 100						
IDE. ORGANIZATION S NAME								
OR 10b. INDIVIDUAL'S SURNAME								
INDIVIDUAL'S FIRST PERSONAL NAME								
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)								SUFFIX
0c. MAILING ADDRESS	CITY				STAT	E	POSTAL CODE	COUNTRY
1c. MAILING ADDRESS	СІТҮ				STAT		NAL NAME(S)/INITIAL(S) POSTAL CODE	COUNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):								
This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable)		INANCING STATE						
, ,		overs timber to be		cover	rs as-extracte	ed c	ollateral 🔽 is filed as a	fixture filing
5. Name and address of a RECORD OWNER of real estate described ir (if Debtor does not have a record interest):	Main S describ		ca or C	Complete	e Legal I	De) which inures to scription refer to \$ /2018	
7. MISCELLANEOUS:								