UCC FINANCING STATEMENT

| 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) | | | | |
| 2085 28770 CSC | 7 | | | |
| 801 Adlai Stevenson Drive Springfield, IL 62703 | Filed In: Oregon (Klamath) | | | |
| <u>L</u> | ` <u> </u> | ADOVE SDACE IS EC | R FILING OFFICE USE | ONL V |
| DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (name will not fit in line 1b, leave all of item 1 blank, check here | <u> </u> | ate any part of the Debtor | 's name); if any part of the li | ndividual Debtor's |
| 1a. ORGANIZATION'S NAME | | | | |
| DR 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | LADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| Loomis | Bradley | S | ` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | |
| c. MAILING ADDRESS 1996 Gettle St | сітү Klamath Falls | STATE OR | POSTAL CODE 97603 | COUNTRY |
| name will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME | and provide the Individual Debtor information in ite | | NAL NAME(S)/INITIAL(S) | SUFFIX |
| Loomis | Catherine | A | | |
| c. MAILING ADDRESS 1996 Gettle St | сітү Klamath Falls | STATE OR | POSTAL CODE 97603 | COUNTRY |
| B. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASS | SIGNOR SECURED PARTY): Provide only <u>one</u> Secu | red Party name (3a or 3b |)) | |
| 3a. ORGANIZATION'S NAME Community 1st Credit | Union | | | |
| 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIO | ADDITIONAL NAME(S)/INITIAL(S) | |
| sc. MAILING ADDRESS PO Box 870 | CITY DuPont | STATE WA | POSTAL CODE 98327 | COUNTRY |
| 4. COLLATERAL: This financing statement covers the following coll Perfection: Purchase Money Security Intere- limited to the complete Solar system and al Parcel: M62032 Alt Parcel: 000M62032 Situ | Il of its components installed at 19 | 996 Gettle St Kl ath Falls, OR 9 | amath Falls, OR 9 | 97603 Legal |

2021-004889

03/31/2021 01:06:00 PM

Fee: \$92.00

Klamath County, Oregon

| 5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) | being administered by a Decedent's Personal Representative |
|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| 6a. Check only if applicable and check only one box: | 6b. Check only if applicable and check only one box: |
| Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility | Agricultural Lien Non-UCC Filing |
| 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Bu | yer Bailee/Bailor Licensee/Licensor |
| 8. OPTIONAL FILER REFERENCE DATA: | 2085 28770 |

UCC FINANCING STATEMENT ADDENDUM

| FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Stateme | nt; if line 1b was left blank | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--|
| because Individual Debtor name did not fit, check here | | | | | |
| | | | | | |
| 9b. INDIVIDUAL'S SURNAME Loomis | | | | | |
| FIRST PERSONAL NAME Bradley ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | | | | |
| S | | | E IS FOR FILING OFFIC | | |
| DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor namedo not omit, modify, or abbreviate any part of the Debtor's name) and enter the late. ORGANIZATION'S NAME | | line 1b or 2b of the Financing | Statement (Form UCC1) (u | se 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 | |
| 11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNATION'S NAME | GNOR SECURED PARTY | S NAME: Provide only <u>one</u> | name (11a or 11b) | | |
| OR 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDIT | 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 REAL ESTATE RECORDS (if applicable) | covers timber to be | e 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 16 (if Debtor does not have a record interest): Bradley S Loomis Catherine A Loomis 1996 Gettle St Klamath Falls, OR 97603 | Perfection: Purcha Generac battery a the complete Sola 1996 Gettle St Kla 000M62032 Situs 97603 Abbreviated 82, Pleasant Hom- file in the office of | ase Money Security and all Solar equipm r system and all of math Falls, OR 97 Address: 1996 Ge d Legal Description e Tracts, according the County Clerk of escription refer to 5 | nent including but its components ir 603 Parcel: M620 ttle St, Klamath Fa i: The Westerly 15 g to the official pla f Klamath County | not limited to nstalled at 32 Alt Parce alls, OR 53 feet of Lot t thereof on c, Oregon. Fo | |
| 17. MISCELLANEOUS: | | | | | |

UCC FINANCING STATEMENT ADDENDUM

| DLLOW INSTRUCTIONS NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing because Individual Debtor name did not fit, check here | g Statement; if line 1b was le | ft blank | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------------|-----------------------|------------------|------------------------------------|-----------------|
| 9a. ORGANIZATION'S NAME | | | | | | |
| R at the property of the prope | | | | | | |
| 9b. INDIVIDUAL'S SURNAME | | | | | | |
| Loomis | | | | | | |
| FIRST PERSONAL NAME | | | | | | |
| Bradley | | | | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | | SUFFIX | | | | |
| S | | | THE ABOVE | SPACE | IS FOR FILING OFFICE | USE ONLY |
| b. DEBTOR'S NAME: Provide (10a or 10b) only one additional D do not omit, modify, or abbreviate any part of the Debtor's name) a | | | ne 1b or 2b of the Fi | nancing S | Statement (Form UCC1) (use | exact, full nan |
| 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 | COUNTRY |
| 11b. INDIVIDUAL'S SURNAME . MAILING ADDRESS | FIRST PERS | SONAL NAME | | ADDITIO STATE | NAL NAME(S)/INITIAL(S) POSTAL CODE | SUFFIX |
| ADDITIONAL SPACE FOR ITEM 4 (Collateral): | | | | | | |
| This FINANCING STATEMENT is to be filed [for record] (or rec REAL ESTATE RECORDS (if applicable) | Cov | ANCING STATEMI ers timber to be cui | | extracted (| collateral 🗾 is filed as a | fixture filing |
| (if Debtor does not have a record interest): | , | 1-13-2000 | | | | |
| | | | | | | |