Fee: \$92.00 **UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) 1-800-858-5294 CSC B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 2275 83792 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Oregon (Klamath) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME OR 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Brunner **James** 1c. MAILING ADDRESS 31465 Transformer Rd CITY STATE POSTAL CODE COUNTRY Malin OR 97632 USA 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here 🦳 and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a, ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Brenda F Brunner 2c. MAILING ADDRESS 31465 Transformer Rd POSTAL CODE CITY STATE COUNTRY USA Malin OR 97632 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Community 1st Credit Union 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. MAILING ADDRESS PO Box 870 POSTAL CODE COUNTRY DuPont WA 98327 USA 4. COLLATERAL: This financing statement covers the following collateral: Perfection: Purchase Money Security Interest - In Fixture. All Solar equipment including but not limited to the complete Solar system and all of its components installed at 31465 Transformer Rd Malin, OR 97632 Parcel: R108350 Alt Parcel: 4112E0401800 Situs Address: 31465 Transformer Rd, Malin, OR 97632 Abbreviated Legal Description: TOWNSHIP 41 SOUTH, RANGE 12 EAST OF THE WILLAMETTE MERIDIAN, KLAMATH COUNTY, OREGON. THE EAST 150 FEET OF THE SE 1/4 NE 1/4 OF SECTION 4, LYING SOUTH OF THE HIGH LINE IRRIGATION CANAL OF MALIN IRRIGATION DISTRICT; AND THE SW 1/4 OF NW 1/4 OF SECTION 3, LYING SOUTH OF THE HIGH LINE IRRIGATION CANAL OF MALIN IRRIGATION DISTRICT. For Complete Legal Description refer to Sale Instrument #2019-000488 Date: 01/17/2019

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: Agricultural Lien Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Non-UCC Filing 7. ALTERNATIVE DESIGNATION (if applicable): Seller/Buyer Consignee/Consignor Bailee/Bailor Lessee/Lessor Licensee/Licensor 8. OPTIONAL FILER REFERENCE DATA

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UCC FINANCING STATEMENT ADDENDUM

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UCC FINANCING STATEMENT ADDENDUM

OLLOW INSTRUCTIONS NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing	g Statement; if line 1b was left blank						
9a. ORGANIZATION'S NAME							
9b. INDIVIDUAL'S SURNAME							
Brunner							
FIRST PERSONAL NAME							
James							
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX						
J			THE ABOVE	SPACE	S FOR FILING OFFICE	USE ONLY	
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		fit in line	1b or 2b of the I	Financing S	statement (Form UCC1) (use	e exact, full name	
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DC. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY	
the individual's surname c. MAILING ADDRESS	FIRST PERSONAL NAM	1E		ADDITIO	NAL NAME(S)/INITIAL(S) POSTAL CODE	SUFFIX	
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):							
3. This FINANCING STATEMENT is to be filed [for record] (or record). REAL ESTATE RECORDS (if applicable)							
5. Name and address of a RECORD OWNER of real estate described (if Debtor does not have a record interest):	MALIN IRRIGA SECTION 3, L' CANAL OF MA	estate: TION (ING S LIN IR	DISTRICT SOUTH O RIGATIO	Γ; AND F THE N DIST	THE SW 1/4 OF HIGH LINE IRRICE TRICE. For Comp. 2019-000488 Date	NW 1/4 OI GATION lete Legal	