UCC FINANCING STATEMENT		Fee: \$92	2.00	
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)				
2279 94122	$\neg$			
CSC 801 Adlai Stevenson Drive				
Springfold II 62702	In: Oregon			
	(Klamath)			
	THE ABOVE SPA	CE IS FOR FILING	OFFICE USE C	NLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 blank, check here and provide to	name; do not omit, modify, or abbreviate any part of the Individual Debtor information in item 10 of the Fi			
1a. ORGANIZATION'S NAME				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME	(S)/INITIAL(S)	SUFFIX
Lundy	Maureen	M		301117
1c. MAILING ADDRESS 1850 E Lowell St	CITY	STATE POSTAL O		COUNTRY
	Klamath Falls	OR 97601	l 	USA
2. DEBTOR'S NAME: Provide only <u>one</u> 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 of the Individual Debtor information in item 10 of the F			
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME	(S)/INITIAL (S)	SUFFIX
Lundy	Charles	V		
2c. MAILING ADDRESS 1850 E Lowell St	<sub>СІТҮ</sub> Klamath Falls	OR 97601		COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Provide only one Secured Party name	ne (3a or 3b)		'
3a. ORGANIZATION'S NAME Community 1st Credit Union				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
30. INDIVIDUAL 3 SURVAINE	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/MITTAL(S)		SUFFIX
3c. MAILING ADDRESS PO Box 870	CITY	STATE POSTAL (		COUNTRY
	DuPont	WA   98327	,	USA
4 COLLATERAL: This financing statement covers the following collateral: Perfection: Purchase Money Security Interest - In Fixt Solar system and all of its components installed at 18 Parcel: 3809E29AA02900 Situs Address: 1850 E Low THE NORTHEASTERLY 25 FEET OF LOT 10 AND ATHE OFFICIAL PLAT THEREOF ON FILE IN THE OI OREGON. For Complete Legal Description refer to Salar States of the States of	50 E Lowell St Klamath Falls, O vell St, Klamath Falls, OR 97601 ALL OF LOT 9, BLOCK 9, HILLS FFICE OF THE COUNTY CLER	R 97601 Parce Abbreviated L SIDE ADDITIOI K OF KLAMAT	el: R186872 ∟egal Descr N, ACCORI ⊺H COUNT`	2 Alt iption: DING TO

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 Lessee/Lessor Consignee/Consignor 7. ALTERNATIVE DESIGNATION (if applicable): Seller/Buyer Bailee/Bailor Licensee/Licensor 8. OPTIONAL FILER REFERENCE DATA:

2279 94122

**2022-002869**Klamath County, Oregon

03/08/2022 08:05:04 AM

## **UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS  9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if	if line 1b was left t	olank				
because Individual Debtor name did not fit, check here  9a. ORGANIZATION'S NAME						
OR						
OR 9b. INDIVIDUAL'S SURNAME						
Lundy FIRST PERSONAL NAME						
Maureen						
ADDITIONAL NAME(S)/INITIAL(S)	s	UFFIX				
M			THE ABOVE	SPACE	S FOR FILING OFFIC	E USE ONLY
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 materials.						
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 ASSIGN ASSIGN ASSIGN ASSIGN ASSIGN ASSIGN ASSIGN ASSIGN	IOR SECURE	D PARTY	S NAME: Provide o	only <u>one</u> na	me (11a or 11b)	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
11c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
13. 13 This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)						
15. Name and address of a RECORD OWNER of real estate described in item 16	16. Description	timber to be o		extracted o	collateral [V] is filed as	a fixture filing
(if Debtor does not have a record interest):  Maureen M Lundy				curity I	Interest - In Fixtu	ıre. All Solaı
Charles V Lundy	equipment including but not limited to the complete Solar system					
1850 E Lowell Št	and all of its components installed at 1850 E Lowell St Klamath Falls, OR 97601 Parcel: R186872 Alt Parcel: 3809E29AA02900					
Klamath Falls, OR 97601	1 '					
					ath Falls, OR 97 ORTHEASTERL	
					CK 9, HILLSIDE	
					T THEREOF ON	
					RK OF KLAMAT	
17. MISCELLANEOUS:						

## **UCC FINANCING STATEMENT ADDENDUM**

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing	Statement; if line 1b was left b	ank			
9a. ORGANIZATION'S NAME					
9b. INDIVIDUAL'S SURNAME					
Lundy FIRST PERSONAL NAME Maureen					
ADDITIONAL NAME(S)/INITIAL(S)	SU	FFIX			
<ol> <li>DEBTOR'S NAME: Provide (10a or 10b) only one additional Deduction do not omit, modify, or abbreviate any part of the Debtor's name) and</li> </ol>		did not fit in line 1b or		IS FOR FILING OFFICE Statement (Form UCC1) (us	
10a. ORGANIZATION'S NAME	<u> </u>				
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
11b. INDIVIDUAL'S SURNAME  11c. MAILING ADDRESS	FIRST PERSON CITY	AL NAME	STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
13. This FINANCING STATEMENT is to be filed [for record] (or record REAL ESTATE RECORDS (if applicable)		CING STATEMENT:	covers as-extracted	collateral 🗾 is filed as	a fixtura filina
15. Name and address of a RECORD OWNER of real estate described in (if Debtor does not have a record interest):	n item 16 16. Description OREGON	of real estate:	e Legal Descr	iption refer to Sal	