

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) 2449 96590 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 Shaw	FIRST PERSONAL NAME Randy	ADDITIONAL NAME(S)/INITIAL(S) L W	SUFFIX
1c. MAILING ADDRESS	12952 Crystal Springs Rd	CITY Klamath Falls	STATE OR	POSTAL CODE 97603 COUNTRY 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 Shaw	FIRST PERSONAL NAME Carolyn	ADDITIONAL NAME(S)/INITIAL(S) J	SUFFIX
2c. MAILING ADDRESS	12952 Crystal Springs Rd	CITY Klamath Falls	STATE OR	POSTAL CODE 97603 COUNTRY USA

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				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	PO Box 870	CITY DuPont	STATE WA	POSTAL CODE 98327 COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

Perfection: Purchase Money Security Interest - In Fixture. Complete Generac Pwr generator and all Solar energy equipment including but not limited to the complete Solar and Energy Storage system and all of its components installed at 12952 Crystal Springs Rd Klamath Falls, OR 97603 Parcel: R38630 Alt Parcel: 38630 Situs Address: 12952 Crystal Springs Rd, Klamath Falls, OR 97603 Abbreviated Legal Description: Parcel 1: Lot 15, Block 7, Altamont Acres, according to the official plat thereof in file in the office of the County Clerk of Klamath County Oregon. Parcel 2: A tract of land situated in the NE 1/4 NW 1/4 and the NW 1/4 NE 1/4 of Section 27, Township 39 South, Range 10 East of the Willamette Meridian, Klamath County, Oregon. For Complete Legal Description refer to Sale Instrument #2021-010246 Date: 06/30/2021

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

2449 96590

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

OR 9b. INDIVIDUAL'S SURNAME

Shaw

FIRST PERSONAL NAME

Randy

ADDITIONAL NAME(S)/INITIAL(S)

L W

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

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 ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

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. ☒ 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 filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

Randy L W Shaw

Carolyn J Shaw

12952 Crystal Springs Rd

Klamath Falls, OR 97603

16. Description of real estate:

Perfection: Purchase Money Security Interest - In Fixture. Complete

Generac Pwr generator and all Solar energy equipment including but not limited to the complete Solar and Energy Storage system and all of its components installed at 12952 Crystal Springs Rd Klamath Falls, OR 97603 Parcel: R38630 Alt Parcel: 38630 Situs Address: 12952 Crystal Springs Rd, Klamath Falls, OR 97603 Abbreviated Legal Description: Parcel 1: Lot 15, Block 7, Altamont Acres, according to the official plat thereof in file in the office of the County Clerk of Klamath County Oregon. Parcel 2: A tract of land

17. MISCELLANEOUS:

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FOLLOW INSTRUCTIONS

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9a. ORGANIZATION'S NAME

OR 9b. INDIVIDUAL'S SURNAME

Shaw

FIRST PERSONAL NAME

Randy

ADDITIONAL NAME(S)/INITIAL(S)

L W

SUFFIX

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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 ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR 11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

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15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

situated in the NE 1/4 NW 1/4 and the NW 1/4 NE 1/4 of Section 27, Township 39 South, Range 10 East of the Willamette Meridian, Klamath County, Oregon. For Complete Legal Description refer to Sale Instrument #2021-010246 Date: 06/30/2021

17. MISCELLANEOUS: