UCC FINANCING STATEMENT				Fee: \$87.00	
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)					
	_				
2506 91406					
CSC 801 Adlai Stevenson Drive					
Springfield II 62702	In: Oregon				
	(Klamath)				
<u> </u>		THE ABOVE SPAC	E IS FO	R FILING OFFICE USE O	ONLY
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 and provide to the name will not fit in line 1b, leave all of item 1 blank, check here and provide to the name will not fit in line 1b, leave all of item 1 blank, check here.		modify, or abbreviate any part of the rinformation in item 10 of the Fina			
1a. ORGANIZATION'S NAME					
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Moore	Clint			(-)	
1c. MAILING ADDRESS 153215 Little River Loop	CITY		STATE	POSTAL CODE	COUNTRY
	La Pine		OR	97739	USA
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full in name will not fit in line 2b, leave all of item 2 blank, check here and provide 2a. ORGANIZATION'S NAME		modify, or abbreviate any part of the or information in item 10 of the Fina			
OR					
2b. INDIVIDUAL'S SURNAME Moore	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
	Beverly		STATE	POSTAL CODE	COUNTRY
2c. MAILING ADDRESS 153215 Little River Loop	La Pine		OR	97739	USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU		vide only <u>one</u> Secured Party name	(3a or 3b)	'
3a. ORGANIZATION'S NAME 1st Security Bank of Washingto	n				
OR OR INDIVIDUALIS CUIDNAME					
3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
22 MAILING ADDRESS D. O. Davi 07000	CITY		STATE	POSTAL CODE	COUNTRY
3c. MAILING ADDRESS P. O. Box 97000	Lynnwood		WA	98046	USA
4 COLLATERAL: This financing statement covers the following collateral: Windows					
APN: M895627					
Legal: LOT 21 BLOCK 4 OF PLAT NO. 1204, LITTLE THEREOF ON FILE IN THE OFFICE OF THE COUN					•

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/Buy	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: :5152429350 Moore Debtor (Klamath County, OR)	2506.91400

2023-001451 Klamath County, Oregon

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; because Individual Debtor name did not fit, check here	if line 1b was le	eft blank				
9a. ORGANIZATION'S NAME						
R 9b. INDIVIDUAL'S SURNAME						
Moore FIRST PERSONAL NAME						
Clint ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	TUE 406			
D. 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					S FOR FILING OFFICE statement (Form UCC1) (use	
10a. ORGANIZATION'S NAME						
R 10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
Dc. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTR
1. ADDITIONAL SECURED PARTY'S NAME or ASSIGN	NOR SECUI	RED PARTY	S NAME: Prov	ide only <u>one</u> na	ame (11a or 11b)	
R 11b. INDIVIDUAL'S SURNAME	FIRST PER:	FIRST PERSONAL NAME			ADDITIONAL NAME(S)/INITIAL(S)	
I Ic. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTR
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
 This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 		4. This FINANCING STATEMENT: ☐ covers timber to be cut ☐ covers as-extracted collateral ✓ is filed as a fixture filing				
 Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): 	_ I	tion of real estate	e:			
	RANCH FILE IN	I, ACCORI	DING TO T ICE OF TH	HE OFFI). 1204, LITTLE F CIAL PLAT THEF TY CLERK OF K	REOF OI