					2023-0047 Klamath County 06/20/2023 01:14:02 Fee: \$87.00	, Oregon
	C FINANCING STATEMENT					
A. I	VAME & PHONE OF CONTACT AT FILER (optional) me: Wolters Kluwer Lien Solutions Phone: 800-331-3282 F	av: 818 662 4141				
	E-MAIL CONTACT AT FILER (optional)	ax. 010-002-4141				
	uccfilingreturn@wolterskluwer.com					
C. 9	SEND ACKNOWLEDGMENT TO: (Name and Address) 25556 - S	SOLAR MOSAIC				
Ιſ	Lien Solutions 935	588927				
'	P.O. Box 29071	· · ·				
	Glendale, CA 91209-9071 OR	-				
	FIX	TURE				
	File with: Klamath, OR		THE ABOVE SP	ACE IS F	OR FILING OFFICE US	SE ONLY
	EBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact					
na ſ	me will not fit in line 1b, leave all of item 1 blank, check here and prov 1a. ORGANIZATION'S NAME	vide the Individual Debtor	nformation in item 10 of the Fi	nancing St	atement Addendum (Form l	JCC1Ad)
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	AME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	Riker	Joan				
1c. N	IAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
16	12 Sargent Ave	Klamath Falls		OR	97601	USA
	EBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use exact					
na ſ		vide the Individual Debtor	nformation in item 10 of the Fi	nancing St	atement Addendum (Form l	JCC1Ad)
	2a. ORGANIZATION'S NAME					
OR .	26. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	AME		NAL NAME(S)/INITIAL(S)	SUFFIX
2c. N	IAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3. S	ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S	ECURED PARTY): Provid	le only <u>one</u> Secured Party na	ne (3a or 3	b)	
	3a. ORGANIZATION'S NAME Solar Mosaic LLC					
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL I	IAME		NAL NAME(S)/INITIAL(S)	SUFFIX
	SU. INDIVIDUALS SURVANIE	FIRST FERSONALT		ADDITIC	INAL NAME(S)/INITIAL(S)	JOFFIX
3c. I	IAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
60	1 12th Street, Suite 325	Oakland		СА	94607	USA
	DLLATERAL: This financing statement covers the following collateral:	oundrid		0,1	01001	00,1
1. A mor the Fixt 2. A 3. A ("Ho bety	collateral includes the following, whether now owned or he Il solar panels, inverters, battery storage, hot water solar sy itoring and/or other distributed generation interconnect equ Solar Equipment, "Purchased Goods") excluding Fixtures (a ures are referred to as "Collateralized Goods"); Il accessions, attachments, accessories, tools, parts, suppl Il proceeds from warranty claims related to the Collateralized ome Improvement Agreement") and, if debtor has received veen the debtor and its operations and maintenance contra	vstems, racking syste ipment (collectively, as defined in Article ies, replacements of ed Goods, the home an operations and m ctor ("Operations an	ems, wiring, electrical an "Solar Equipment") and 9 of the UCC), if any (su and additions to any Cc improvement agreemen aintenance loan, the op d Maintenance Agreeme	d mecha home in ch Purch Ilateraliz t betwee erations ent");	nical connections, me provement products lased Goods which ex ed Goods; n the debtor and sola and maintenance agre	etering, (together with coludes r contractor eement
ass	Il rebates and incentives that are payable as a result of inst gned to debtor's solar contractor or operations and mainter	nance contractor;				
	Il debtor's rights, title, interests, and remedies under all agr				•	
	heck <u>only</u> if applicable and check <u>only</u> one box: Collateral is <u>held in a</u> Check <u>only</u> if applicable and check <u>only</u> one box:	Trust (see UCC1Ad, item			red by a Decedent's Perso if applicable and check on	
<i>σα.</i> (show only in applicable and check only one box.		Lon. c	Direct Only	in applicable and check of	TY ONE DOX.

5. Check only if applicable and check only on	ie box: Collateral is held in a Tru	ist (see UCC1Ad, item 17 and	d Instructions) 🔛	being administered by a Dec	cedent's Personal Representativ	е
6a. Check only if applicable and check only	one box:			6b. Check only if applicable	and check <u>only</u> one box:	
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Transm	nitting Utility	Agricultural Lien	Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if application	ble): Lessee/Lessor	Consignee/Consignor	Seller/Buyer	r 🔄 Bailee/Bailor	Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:						
93588927 38	80499			692409		

Prepared by Lien Solutions, P.O. Box 29071, Glendale, CA 91209-9071 Tel (800) 331-3282

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

	 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				
00					
OR	96. INDIVIDUAL'S SURNAME Riker				
	FIRST PERSONAL NAME Joan				
	ADDITIONAL NAME(S)INITIAL(S)	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
100	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
11.	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)		
11c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

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(including, without limitation, the Home Improvement Agreement and Operations and Maintenance Agreement); and

6. All consideration received from the collection, sale or other disposition of any property that constitutes Collateralized Goods, including any payment received from any insurer arising from any loss, damage or destruction of any Collateralized Goods and any other payment received as a result of possessing any Collateralized Goods or any proceeds of Collateralized Goods.

All of the collateral described above is intended to be classified as personal property, but to the extent that any portion of such collateral is or becomes classified as a fixture, this filing constitutes a fixture filing as to such collateral. The collateral described above secures a purchase money obligation in favor of the secured party and secured party's lien thereon constitutes a purchase money security interest.

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT:
 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): Joan Riker 1612 Sargent Ave Klamath Falls, OR 97601 	16. Description of real estate: FAIRVIEW, BLOCK 10, LOT 2 State: OR County: Klamath County
17. MISCELLANEOUS: 93588927-OR-35 25556 - SOLAR MOSAIC Solar M	Mosaic LLC File with: Klamath, OR 380499 692409