2023-007950

Klamath County, Oregon

09/11/2023 01:38:02 PM Fee: \$87.00

## UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS

FUL	LOW INSTRUCTIONS				
	NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294		1		
В.	E-MAIL CONTACT AT SUBMITTER (optional)		1		
	SPRFiling@cscglobal.com				
C.	SEND ACKNOWLEDGMENT TO: (Name and Address)		1		
	2638 56406 CSC				
	004.4.11.101	Filed In: Oregon			
Ιı	Springfield, IL 62703	(Klamath)			
l I	<del>_</del>	`			
L	SEE BELOW FOR SECURED PARTY CONTACT INFO				
	INITIAL FINANCING STATEMENT FILE NUMBER 119-012321 10/21/2019				nent Addendum
2.	TERMINATION: Effectiveness of the Financing Statement identified about	ove is terminated with resp	pect to the security interest(s) of Sec	eured Part(y)(ies) authorizing this Termina	ation Statement
3.					
4.	CONTINUATION: Effectiveness of the Financing Statement identified additional period provided by applicable law	above with respect to the	security interest(s) of Secured Party	authorizing this Continuation Statement	is continued for the
5.	PARTY INFORMATION CHANGE:				
C	Check <u>one</u> of these two boxes: AND Ch				
Т	his Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; <u>and</u> item 3	address: Complete ADD nan 7a or 7b <u>and</u> item 7c 7a or 7b,	ne: Complete item DELETE name: and item 7c to be deleted in	Give record name item 6a or 6b
6. (	CURRENT RECORD INFORMATION: Complete for Party Information	Change - provide only one	name (6a or 6b)	<del></del>	
	6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	Gordon (Debtor)	Kirby		A	
7 (	, ,	formation Change - provide only	one name (7a or 7h) (use exact_full name; o	n not omit, modify or abbreviate any part of the De	htor's name)
	7a. ORGANIZATION'S NAME		<u></u>		
OR					
	7b. INDIVIDUAL'S SURNAME				
	INDIVIDUAL'S FIRST PERSONAL NAME				
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c.	MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
8.	COLLATERAL CHANGE: Check only one box:	ADD collatoral	DELETE colleteral	RESTATE covered colleteral	ASSICNI* colleteral
ο.	_ ,				
ь.					collateral in Section 8
		SECURED PARTY CONTACT INFORMATION  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE IS FOR FILING ONLY  THE ABOVE SPACE I			
	DT-2	1000 / IDDI C VIAICA	Logar/taarcss.1441 00	THOSE TO BER GEG TO	
				e of Assignor, if this is an Assignment)	
		_	ebtor		
	9a. ORGANIZATION'S NAME Community 1st Credit Unio	n			
OR					
	9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	9b. INDIVIDUAL'S SURNAME OPTIONAL FILER REFERENCE DATA:	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same a 2019-012321 10/21/2019	s item 1a on Amendment form				
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Sai	me as item 9 on Amendment fo	orm	1		
12a. ORGANIZATION'S NAME					
Community 1st Credit Union					
			1		
OR					
12b. INDIVIDUAL'S SURNAME					
FIRST PERSONAL NAME					
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX			
			THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		
· · · · · · · · · · · · · · · · · · ·			purposes only in some filing offices - see Instruction item 13): Provide only		
one Debtor name (13a or 13b) (use exact, full name; do not omit, mo	odify, or abbreviate any part of	the Debtor's nam	ne); see Instructions if name does not fit		
13a. ORGANIZATION'S NAME					
OR					
13b. INDIVIDUAL'S SURNAME	FIRST PER	SONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
14. ADDITIONAL SPACE FOR (CHECK ONE BOX):	ITEM 8 (Collateral) OF	ROTI	HER INFORMATION (Please Describe)		
15. This FINANCING STATEMENT AMENDMENT:		147.0			
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): Kirby A Gordon Angela M Gordon 12400 Lupine Ln Klamath Falls, OR 97603			iption of real estate: rection PMSI in Fixture. Complete 9.76kW Solar m including 32 Trina 305-Watt energy modules 1 Edge inverter, 1 22kW Generac Guardian rator backup system and all equipment and sonents installed at 12400 Lupine Ln Klamath Falls, 7603 Parcel:595975 MTL:3910-010BC-00400 Map d:39S-10E-10-NW-S Situs Address:12400 LUPINE LAMATH FALLS, OR 97603 Abbreviated Legal ess:TWP 39 RNGE 10 BLK-SEC 10 LOT-2		
18. MISCELLANEOUS:					