2023-010183

Klamath County, Oregon 11/27/2023 02:01:02 PM

Fee: \$92.00

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS						
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294						
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
2699 23579 CSC 801 Adlai Stevenson Drive	\neg					
	ln: Oregon (Klamath)					
SEE BELOW FOR SECURED PARTY CONTACT INFORMATI		THE ABOVE SPA				
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full nam not fit in line 1b, leave all of item 1 blank, check here and provide the late. ORGANIZATION'S NAME	ne; do not omit, modify, or abl ne Individual Debtor informatio					Debtor's name will
1b. INDIVIDUAL'S SURNAME JOHNSON	FIRST PERSONAL NAME PATRICIA	NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS 912 North 9th Street	сіту Klamath Falls		STATE	97601		COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full nam not fit in line 2b, leave all of item 2 blank, check here	ne; do not omit, modify, or abl ne Individual Debtor informatio					Debtor's name will
2a. ORGANIZATION'S NAME	ie matwada bestor mormato	Thirteen to of the financial	mg statemen	ic Addendam (Form	- Ocerna)	
OR 2b. INDIVIDUAL'S SURNAME JOHNSON	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INIT	TIAL(S)	SUFFIX
2c. MAILING ADDRESS 912 North 9th Street	CITY		STATE	POSTAL CODE		COUNTRY
	Klamath Falls		OR	97601		USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURE 3a. ORGANIZATION'S NAME 1st Security Bank of Washington	ED PARTY): Provide only <u>one</u>	Secured Party name (3	3a or 3b)			
OD	•					
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INIT	TIAL(S)	SUFFIX
3c. MAILING ADDRESS P. O. Box 97000	CITY Lynnwood		STATE	POSTAL CODE 98046		COUNTRY
4. COLLATERAL: This financing statement covers the following collateral: WINDOWS Alt. APN: 368480 A PORTION OF Lots 9 and 10, Block 16, FIRST ADDITION ON file in the office of the County Clerk of Klamath Collaboration Beginning at the most Northerly corner of Lot 10 of Bloand running thence in a Southwesterly direction along less, to the retaining wall built upon Lot 9 in said Block line between Lots 8 and 9 in said Block 16, 50 feet; the 78.5 feet, more or less, to the Southwesterly line of Nicestand Collaboration States and State	unty, Oregon, mo ock 16 of FIRST A the Southeasterl k, parallel with Nir ence Northeaster	re particularly on the factorial of the	describhe Cityley in sa ley in sa nce Sou the firs	ed as follow of Klamath aid Block, 7 utheasterly l at course he	vs: Falls, 0 '8.5 feet parallel erein de	Oregon, t, more or with the scribed,
5. Check only if applicable and check only one box: Collateral is held in a Trust (s	see UCC1Ad, item 17 and Ins	tructions) bein	g administer	red by a Decedent'	's Personal F	Representative
6a. Check only if applicable and check only one box:			_	f applicable and ch		
Public-Finance Transaction Manufactured-Home Transaction 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	A Debtor is a Transmit Consignee/Consignor	ting Utility Seller/Buyer		tural Lien	Non-UCC F	ee/Licensor
8. OPTIONAL FILER REFERENCE DATA: 5152657740 JOHNSON					_	2699 23579

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS

cause Individual Debtor name did not fit, check here					
9a. ORGANIZATION'S NAME					
9b. INDIVIDUAL'S SURNAME					
JOHNSON FIRST PERSONAL NAME					
PATRICIA					
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ADOME OF	405 10 50	D FIL ING OFFICE	- 1105 01111
LOEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or I				R FILING OFFICE orm UCC1) (use exa	
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mai 10a. ORGANIZATION'S NAME	iling address in line 10c				
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
					Louisen
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
. MAILING ADDRESS	CITY	ST	ATE POST	TAL CODE	COUNTR
ADDITIONAL SECURED PARTY'S NAME or ASSIGN	 NOR SECURED PARTY'S	NAME: Provide only <u>or</u>	<u>le</u> name (11a	or 11b)	
11a. ORGANIZATION'S NAME					
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	AC	DITIONAL NA	AME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY	ST	ATE POST	TAL CODE	COUNTR
. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEM		etad callatara	u in filed on	a fixture filing
TELLE ESTATE TESSIFIED (II applicable)			icted collatera	is filed as	a lixture illing
Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	covers timber to be counted. 16. Description of real estate: Alt. APN: 368480				
Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate: Alt. APN: 368480 APN: R368480				
Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate: Alt. APN: 368480 APN: R368480 A portion of Lots 9	and 10, Block			
Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate: Alt. APN: 368480 APN: R368480	and 10, Block ²	official p	olat thereof c	n file in th
Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate: Alt. APN: 368480 APN: R368480 A portion of Lots 9 of Klamath Falls, a office of the Count particularly describ	and 10, Block faccording to the y Clerk of Klamsed as follows:	official p ath Cour	olat thereof c nty, Oregon,	n file in th more
Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate: Alt. APN: 368480 APN: R368480 A portion of Lots 9 of Klamath Falls, a office of the Count particularly describ Beginning at the m	and 10, Block of according to the y Clerk of Klams and as follows: anost Northerly co	official path Cour	plat thereof on ty, Oregon, Lot 10 of Blo	on file in the more ock 16 of
Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate: Alt. APN: 368480 APN: R368480 A portion of Lots 9 of Klamath Falls, a office of the Count particularly describ	and 10, Block of the coording to the y Clerk of Klama ed as follows: nost Northerly coto the City of Kl	official path Cour orner of l amath F	olat thereof conty, Oregon, Lot 10 of Blo Falls, Oregon	on file in the more ock 16 of or, and

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS

9a. ORGANIZATION'S NAME				
CL. INDIVIDUALIS CUIDNAMS				
9b. INDIVIDUAL'S SURNAME JOHNSON				
FIRST PERSONAL NAME				
PATRICIA ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
DEDTOD'S NAME OF THE OWNER OWNER OF THE OWNER O			IS FOR FILING OFFIC	
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name do not omit, modify, or abbreviate any part of the Debtor's name) and enter the		f the Financing Staten	nent (Form UCC1) (use exa	act, full name;
10a. ORGANIZATION'S NAME				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUALS FINGS FENGUNAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
MAILING ADDRESS	СІТҮ	STATE	POSTAL CODE	COUNTRY
C ADDITIONAL OF CLIDED DADTY/O MANS	CNOD OF CURED BARTY/O MANE			
ADDITIONAL SECURED PARTY'S NAME or ASSI	GNOR SECURED PARTY'S NAME:	Provide only <u>one</u> nan	ne (11a or 11b)	
ALL INDIVIDUALS OUTDIANTS	LEIDOT DEDOCNAL NAME	ADDITIO	ANIAL NIAME (C)/INITIAL (C)	TOUREN.
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ADDITIONAL SPACE FOR ITEM 4 (Colletoral)				
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This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	covers timber to be cut 16. Description of real estate: the alley in said Block, 7 built upon Lot 9 in said E Southeasterly parallel wi Block 16, 50 feet; thence herein described, 78.5 fe	8.5 feet, more llock, parallel th the line be Northeaster eet, more or le	e or less, to the r with Ninth Stree tween Lots 8 and ly parallel with thess, to the South	etaining wa t; thence d 9 in said ne first cour westerly lir