	JANCING STATEMENT			2024-000143 Klamath County, Oregon 01/05/2024 11:35:02 AM Fee: \$132.00		
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS		٠.				
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)						
B. E-MAIL CONTACT AT SUBMITTER (optional)						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
Umpqua Bank PO Box 1580	7					
Roseburg, OR 97470						
SEE BELOW FOR SECURED PARTY CONTACT IN	IFORMATION	THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY	
<u></u>	exact, full name; do not omit, mod nd provide the Individual Debtor int					
1a. ORGANIZATION'S NAME  Dodson Family, LLC						
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
1128 Tamera Dr	Klamath Fal	ls	OR	97603	USA	
2b. INDIVIDUAL'S SURNAME  Dodson  2c. MAILING ADDRESS  13843 S Magic Wand St	FIRST PERSONAL N  Matthew  CITY  Draper	CITY		POSTAL CODE 84020	SUFFIX	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN		only one Secured Par	UT	<u>'</u>	00/(	
3a. ORGANIZATION'S NAME	NON BEOOKED FAIRTY. TOWNE	orny <u>one</u> occured i ar	ty name (ou or or			
Umpqua Bank		=	Laborio		SUFFIX	
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		
3c. MAILING ADDRESS	CITY			POSTAL CODE	COUNTRY	
C/O Loan Support Services, PO Box 1580 4. COLLATERAL: This financing statement covers the following collate	<del></del>	Roseburg		97470	USA	
All Fixtures; whether any of the foregoreplacements, and substitutions relating t foregoing.	oing is owned nov o any of the foregoi	v or acquire ng; all recor	ed later; a ds of any	all accessions, kind relating to	additions, any of the	
	in a Trust (see UCC1Ad, item 17 a	and Instructions)	7	red by a Decedent's Person if applicable and check <u>only</u>		
6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Trans	saction A Debtor is a Tr	ansmitting Utility		Itural Lien Non-UCC		
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buy	<del></del>		nsee/Licensor	
8. OPTIONAL FILER REFERENCE DATA: 748367362		<u> </u>		1200	035	

**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 Dodson Family, LLC 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 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 Dodson INDIVIDUAL'S FIRST PERSONAL NAME **Kristin** INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE CITY STATE COUNTRY Draper 84020 USA 13843 S Magic Wand St UT ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME 11c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. X This FINANCING STATEMENT is to be filed (for record) (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) covers timber to be cut covers as-extracted collateral X is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): The Land referred to herein below in situated in the County of Klamath, State of Oregon, and is described as follows: THE FOLLOWING DESCRIBED PROPERTY IN KLAMATH **COUNTY, OREGON:** A TRACT OF LAND 320 FEET WIDE NORTH AND SOUTH, IN **ENTERPRISE TRACTS NO. 38A AND 41B,** AND LYING NORTH OF THE NORTH LINE OF THE COUNTY **ROAD KNOWN AS THE EXTENSION OF** EBERLEIN AVENUE AND BOUNDED ON THE NORTH BY THE 17. MISCELLANEOUS:

FOLLOW INSTRUCTIONS

FOLLOW INSTRUCTIONS		•		
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statemen because Individual Debtor name did not fit, check here	nt; if line 1b was left blank			
9a. ORGANIZATION'S NAME				
Dodson Family, LLC				
9b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
	•			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
				IG OFFICE USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name		line 1b or 2b of the Finan	cing Statement (Forn	n UCC1) (use exact, full name
do not omit, modify, or abbreviate any part of the Debtor's name) and enter to 10a. ORGANIZATION'S NAME	ne mailing address in line 100			
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OR 10b, INDIVIDUAL'S SURNAME				_
155. 115.77.557.25 55.117.111.2	•			
INDIVIDUAL'S FIRST PERSONAL NAME				
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10c. MAILING ADDRESS	CITY	STA	ATE POSTAL COL	DE COUNTRY
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11. 🗌 ADDITIONAL SECURED PARTY'S NAME 💇 📗 ASSI	GNOR SECURED PARTY	S NAME: Provide only	one name (11a or 11b	D)
11a. ORGANIZATION'S NAME				
OR LALL MODIFICATION OF CHICAGO				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	AD	DITIONAL NAME(S)/	/INITIAL(S) SUFFIX
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12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				
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REAL ESTATE RECORDS (if applicable)	covers timber to be	cut covers as-extra	cted collateral X	is filed as a fixture filing
5. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):			ND AVENUE	_
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	OREGON EXTE			
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	OF ENTERPRIS			
				Y REMAIN AFTE
	CONVEYANCE			
•	ENTERPRISE L	AND AND INVE	ESTMENT C	OMPANY TO TH
	U.S.R.S. FOR R			
	KLAMATH COU	NTY, OREGON	FOR ROAD I	PURPOSES.
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17. MISCELLANEOUS:	•			

**FOLLOW INSTRUCTIONS** 

Dodson Family, LLC						
9b. INDIVIDUAL'S SURNAME						
FIRST PERSONAL NAME			•			
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
			S FOR FILING OFFIC			
<ol> <li>DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor na do not omit, modify, or abbreviate any part of the Debtor's name) and enter</li> </ol>			b or 2b of the Fina	ancing S	tatement (Form UCC1) (u	se exact, full name
10a. ORGANIZATION'S NAME						
R 10b. INDIVIDUAL'S SURNAME						
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c. MAILING ADDRESS	CITY		S	TATE	POSTAL CODE	COUNTRY
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11a. ORGANIZATION'S NAME						
R 11b. INDIVIDUAL'S SURNAME	FIRST PERSO	RST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
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**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 **Dodson Family, LLC** 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 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 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 10c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. 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 STATEMENT: covers timber to be cut covers as-extracted collateral X is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): DEEDED BY ALFRED D. COLLIER AND ETHEL F. COLLIER, HUSBAND AND WIFE, TO GEO H. MERRYMAN AND MABEL C. MERRYMAN, HUSBAND AND WIFE, AND GEORGE H. MERRYMAN, JR. AND ELIZABETH F. MERRYMAN, HUSBAND AND WIFE, RECORDED MAY 2, 1941 IN BOOK 137 AT PAGE 359, DEED

> Finastra 1320 SW Broadway, Suite 100, Portland, OR 97201-3411

RECORDS OF KLAMATH COUNTY, OREGON.

DEEDED BY ALFRED D. COLLIER AND ETHEL F.

EXCEPTING ALSO THAT CERTAIN PARCEL OF LAND

COLLIER, HUSBAND AND WIFE, TO KLAMATH COUNTY,

17. MISCELLANEOUS:

FOLLOW INSTRUCTIONS

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<ol> <li>NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if because Individual Debtor name did not fit, check here</li> </ol>	line 1b was le	ft blank					
9a. ORGANIZATION'S NAME							
Dodson Family, LLC							
9b. INDIVIDUAL'S SURNAME							
FIRST PERSONAL NAME	<u> </u>						
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	<b>T.</b>	4 D O V 5 O D 4 O 5	10 F00 F1 W0 0FF	705 U05 ON V	
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or					Statement (Form UCC1		
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the m	nailing address	in line 10c				<del>.</del>	
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 ASSIGN	OR SECUE	RED PARTY'S	S NAME:	Provide only one na	 ame (11a or 11b)	1	
11a. ORGANIZATION'S NAME							
OR THE INDIVIDUALS SUBMANT						(S) SUFFIX	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERS	FIRST PERSONAL NAME			ADDITIONAL NAME(S)/INITIAL(S)		
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12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):							
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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):		on of real estate:		MAY 11, 19	41 IN BOOK		
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17. MISCELLANEOUS:							

**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 **Dodson Family, LLC** 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 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 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY 10c. MAILING ADDRESS CITY 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 POSTAL CODE COUNTRY 11c. MAILING ADDRESS 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. X 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 X is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): WEST LINE OF VACATED ALANDALE STREET. VACATED BY ORDINANCE NO. 5753 RECORDED JUNE 5, 1970 IN VOLUME M70, PAGE 4511. EXCEPTING ALSO ALL THAT PORTION OF VACATED ALANDALE STREET AND APPLEWOOD STREET AS DESCRIBED IN ORDINANCE NO. 5753 RECORDED JUNE 5,

1970 IN VOLUME M70, PAGE 4511.

17. MISCELLANEOUS: