

2024-006712
Klamath County, Oregon
08/01/2024 08:12:02 AM
Fee: \$87.00

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)

2892 66292
CSC
801 Adlai Stevenson Drive
Springfield, IL 62703

Filed In: Oregon
(Klamath)

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S SURNAME FILICE	FIRST PERSONAL NAME CARMINE	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
------------------------------------	--------------------------------	-------------------------------	--------

1c. MAILING ADDRESS 22397 South Merrill Road

CITY Merrill,	STATE OR	POSTAL CODE 97633	COUNTRY USA
------------------	-------------	----------------------	----------------

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S SURNAME FILICE	FIRST PERSONAL NAME KAY	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
------------------------------------	----------------------------	-------------------------------	--------

2c. MAILING ADDRESS 22397 South Merrill Road

CITY MERRILL	STATE OR	POSTAL CODE 97633	COUNTRY USA
-----------------	-------------	----------------------	----------------

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME 1st Security Bank of Washington

OR

3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

3c. MAILING ADDRESS P. O. Box 97000

CITY Lynnwood	STATE WA	POSTAL CODE 98046	COUNTRY USA
------------------	-------------	----------------------	----------------

4. COLLATERAL: This financing statement covers the following collateral:
WINDOWS

APN: R123271

LEGAL: Lots 1 and 8, Block 8 and all of Block 3, including one-half of vacated "B" Street adjacent to Block 3, vacated by Order recorded March 26,1965 in Volume 360 at page 329, Deed Records of Klamath County, Oregon, CLINTON, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon

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: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box: Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA: 5152850000 FLICE (DEBTOR)

2892 66292

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

OR
9b. INDIVIDUAL'S SURNAME

FILICE

FIRST PERSONAL NAME

CARMINE

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

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

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)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. 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

is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

Lots 1 and 8, Block 8 and all of Block 3, including one-half of vacated "B" Street adjacent to Block 3, vacated by Order recorded March 26, 1965 in Volume 360 at page 329, Deed Records of Klamath County, Oregon, CLINTON, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon

17. MISCELLANEOUS:
fixture filing