

2024-010626

Klamath County, Oregon



00336537202400106260020029

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

12/09/2024 12:03:37 PM

Fee: \$87.00

A. NAME & PHONE OF CONTACT AT FILER (optional) MELINDA MCCLAREN 402-462-4129 EXT 215	
B. E-MAIL CONTACT AT FILER (optional) MSM@tlirr.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">T-L CREDIT COMPANY PO BOX 1386 HASTINGS, NE 68902</div>	

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 WIERSMA		FIRST PERSONAL NAME EARL	ADDITIONAL NAME(S)/INITIAL(S) W	SUFFIX
1c. MAILING ADDRESS PO BOX 177		CITY BONANZA	STATE OR	POSTAL CODE 97623	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 WIERSMA		FIRST PERSONAL NAME PAMELA	ADDITIONAL NAME(S)/INITIAL(S) F	SUFFIX
2c. MAILING ADDRESS PO BOX 177		CITY BONANZA	STATE OR	POSTAL CODE 97623	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 T-L CREDIT COMPANY, A DIVISION OF T-L IRRIGATION CO.					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS PO BOX 1386		CITY HASTINGS	STATE NE	POSTAL CODE 68902	COUNTRY USA

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

1 – 765W 6 TOWER T-L IRRIGATION LINEAR SYSTEM INCLUDING 1 – ISUZU 3CE1 HYD PUMPING UNIT S/N _____ AND ALL OTHER ACCESSORIES S/N 43084

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:

KLAMATH COUNTY, OR - #2688 WIERSMA INITIAL FILING

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

WIERSMA

FIRST PERSONAL NAME

EARL

ADDITIONAL NAME(S)/INITIAL(S)

W

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)

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

WIERSMA EARL & PAMELA
REVOCABLE LIVING TRUST

14. This FINANCING STATEMENT:

☐ covers timber to be cut

☐ covers as-extracted collateral

☒ is filed as a fixture filing

16. Description of real estate:

S ½ N ½ NW ¼ NE ¼ SECTION 15 – T 39 – R 11
S ½ NW ¼ NE ¼ SECTION 15 – T 39 – R 11
SW ¼ NE ¼ SECTION 15 – T 39 – R 11
KLAMATH COUNTY, OREGON

17. MISCELLANEOUS:
KLAMATH COUNTY, OR - #2688 WIERSMA INITIAL FILING