2024-011003

Klamath County, Oregon

12/20/2024 08:27:02 AM

				Fee: \$82.00	
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)					
B. E-MAIL CONTACT AT SUBMITTER (optional)					
recordings@gorequire.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
C. SEND ACKNOWLEDGIVIENT TO. (Name and Address)					
reQuire Real Estate Solutions, LLC P.O. Box 860 Palm Harbor, FL 34682					
SEE BELOW FOR SECURED PARTY CONTACT INFORM	MATION	Prin THE ABOVE		Reset Reset	ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full not fit in line 1b, leave all of item 1 blank, check here  and provident of the providence of the	ame; do not omit, modify, or a de the Individual Debtor inform				ebtor's name will
1a. ORGANIZATION'S NAME					
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	FIRST PERSONAL NAME		AME(S)/INITIAL(S)	SUFFIX
Richardson	Ronald		, BBITTOTI, ET	, , , , , , , , , , , , , , , , , , ,	1001111
1c. MAILING ADDRESS	CITY	I CITY		POSTAL CODE	COUNTRY
34939 SUNSET PL	CHILOQUIN		OR OR	97624	USA
2a. ORGANIZATION'S NAME	ame; do not omit, modify, or al de the Individual Debtor inforn				btor's name will
OR 2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
Richardson		Mary			
2c. MAILING ADDRESS 34939 SUNSET PL	CHILOQUIN		OR STATE	POSTAL CODE 97624	USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECTION SECTION AND ASSIGNED ASSIGNOR SECTION SEC	URED PARTY): Provide only	one Secured Party name	e (3a or 3b)		
Puget Sound Cooperative Credit Union					
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
S. INDIVIDO/LEGOSINIVINE	THOTT EROSIWETW	THE TELESTAL WILL			
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11201 SE 8th Street, Suite 208	BELLEVUE		WA	98004-6420	USA
4. COLLATERAL: This financing statement covers the following collateral:	1			·	
Fixtures and energy equipment, including all accessories, peripheral and associated at 34939 SUNSET PL CHILOQUIN OR 97624	-				-
Lots 43 and 44, Block 48, Tract 1184 - 6 Sections 17 and 18, Township 35 South, 6 Oregon.	•	-		-	
Parcel No.: 240144/ 3507-018AB-08300					
Check only if applicable and check only one box: Collateral is held in a Tru	ust (see UCC1Ad, item 17 and	Instructions)	eing administered	by a Decedent's Personal F	Representative
6a. Check only if applicable and check only one box:	,			pplicable and check only one	
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Trans		Agricultura		
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buyer	Bailee	e/Bailor Licens	see/Licensor
8. OPTIONAL FILER REFERENCE DATA:	·······	manual .			
Richardson635					