



UCC

LIEN NO. 94020649

WILLHITE EXCAVATION

### UCC FINANCING STATEMENT

#### FOLLOW INSTRUCTIONS

|   |
|---|
| A. NAME & PHONE OF CONTACT AT FILER [optional]<br><b>Dylan Hockert 503.282.2566</b>   |
| B. E-MAIL CONTACT AT FILER [optional]<br><b>ar@feenaughty.com</b>   |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)<br><br><b>Feenaughty Machinery Co.<br/>PO Box 13279<br/>Portland, OR 97213-0279</b> |

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<br><b>Willhite Excavation</b> |                          |                          |  |
| OR  | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME      | ADDITIONAL NAME(S)/INITIAL(S) SUFFIX                                 |
| 1c. MAILING ADDRESS<br><b>8380 Bewley Creek Rd</b>    |                          | CITY<br><b>Tillamook</b> | STATE<br><b>OR</b> POSTAL CODE<br><b>97141</b> COUNTRY<br><b>USA</b> |

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 1 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 | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) SUFFIX |
| 2c. MAILING ADDRESS     |                          | CITY                | STATE POSTAL CODE COUNTRY            |

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<br><b>Feenaughty Machinery Co</b> |                          |                         |  |
| OR  | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME     | ADDITIONAL NAME(S)/INITIAL(S) SUFFIX                                 |
| 3c. MAILING ADDRESS<br><b>PO Box 13279</b>                |                          | CITY<br><b>Portland</b> | STATE<br><b>OR</b> POSTAL CODE<br><b>97213</b> COUNTRY<br><b>USA</b> |

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

**F018806 Kobelco ED160 Excavator SN: LH04006366**

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

6. Check only if applicable and check only one box:  
 Public-Finance Transaction  A Debtor is a Transmitting Utility

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

8. OPTIONAL FILER REFERENCE DATA  
**Contract #002151**