STATE OF OREGON

FINANCING STATEMENT STANDARD FORM UCC-1

PLEASE TYPE
READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM. CUSTOMER NUMBER X00835

R 2 5 1 3 0

This Financing Statement is presented to filing officer pursuant to the Uniform Commercial Code. This financing statement remains effective for a period of five years from the date of filing unless extended for additional periods as provided for by ORS Chapter 79.

A. Check (x) one: ☒ DEBTOR NAME, ☐ CONSIGNEE, ☐ LESSEE
(If checked last item name first)

DICKSON, DWAINE A

OR Sec of State
09/18/1992

RE

1. Dickson, Dwaine A.

2. Dickson, Janet M.

3. _____
(Last Name) (First Name) (Middle)

151317_5302121

Lien#: 151317

UCC 92

DEBTOR MAILING ADDRESS:
2310 NW Ice Avenue
Terrebonne, OR 97760

Total Debtor Names: 2

B. Check (x) one: ☒ SECURED PARTY, ☐ CONSIGNOR, ☐ LESSOR
NAME AND ADDRESS (from which security information is obtainable)
Northwest Farm Credit Services, ACA
PO Box 607
Redmond, OR 97756

Telephone Number: 503-548-2126

C. ASSIGNEE NAME AND ADDRESS (if any)

Telephone Number:

Reserved for Filing Officer Use

D. This financing statement covers the following types (or items) of collateral (ORS 79.4020)

Total number of attachments: ____

A 1984 Embassy double-wide mobile home, size 24 foot by 66 foot or any replacements thereof, including but not limited to all parts, accessories and accessions thereto at any time made or acquired.

Check (x) if covered: ☒ PROCEEDS of collateral are also covered ☐ PRODUCTS of collateral are also covered

E. DEBTOR'S SIGNATURE NOT REQUIRED. This statement is filed without the debtors signature to perfect a security interest in collateral (if applicable check box): (1) ☐ collateral already subject to a security interest in another jurisdiction; (2) ☐ which is proceeds of the described original collateral which was perfected; (3) ☐ Collateral as to which the filing has lapsed; or (4) ☐ Collateral acquired after a change of name, identity or corporate structure of debtor.

F. CHECK IF A TRANSMITTING UTILITY (ORS 79.4010) ☐

Debtor hereby authorizes the Secured Party (or Consignor or Lessor) to file a carbon, photographic or other reproduction of this form, financing statement or security agreement as a financing statement under ORS Chapter 79.

By: Dwaine A. Dickson
Dwaine A. Dickson

By: Janet M. Dickson
Janet M. Dickson
Required Signature(s)

Use the following spaces only for Farm Products requiring Effective Financing Statement (EFS) filing.

FARM PRODUCTS EFFECTIVE FINANCING STATEMENT FORM EFS-1

This FARM PRODUCT EFFECTIVE FINANCING STATEMENT is presented to the filing officer pursuant to ORS Chapter 79. This statement remains effective for a period of five years from the date of filing, subject to extensions for additional periods as provided for by ORS Chapter 79.

FARM PRODUCT CODE	COUNTY CODE	CROP YEAR (if applicable)	AMOUNT (if applicable)	DESCRIPTION/LOCATION (if applicable)
—	—	—		
—		—		
—	—	—		
—	—	—		

EFS Statement requires signature of debtor(s) and secured party(ies).

By: _____ By: _____
Signature of Secured Party

By: _____
Signature of Debtor(s)

Source of Payment
Cash ☐
Check # _____

Visa/MasterCard ☐
(see instruction 6-D on reverse of Original copy)

Submit completed form to:
Secretary of State, UCC Section
Capitol Bldg., Room 41
Salem, OR 97310
(503) 378-4146
FAX (503) 373-1166

RETURN ACKNOWLEDGEMENT COPY TO: (name and address)

Farm Credit Services
PO Box 607
Redmond, OR 97756

Please do not type outside of bracketed area

Standard Forms UCC-1/EFS-1

ORIGINAL COPY

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