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FILED: MAR 02, 2021 03:34 PM OREGON SECRETARY OF STATE



UCC

LIEN NO. 92726499

ANNE MARIE HILL REVO

	CC FINANCING STATEMENT LLOW INSTRUCTIONS					•
A.	NAME & PHONE OF CONTACT AT FILER (optional)		]			
B.	E-MAIL CONTACT AT FILER (optional)		1		•	
C.	SEND ACKNOWLEDGMENT TO: (Name and Address)	<u> </u>	1			
	U.S. Bank National Association 1850 Osborn Ave	I				
l	Oshkosh, WI 54902					
Ι.	OSIIKOSII, WI 34902				·	•
L	<del>-</del> .		THE ABOVE SPA	CE IS FO	R FILING OFFICE USE C	ONLY
	DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 blank, check here		modify, or abbreviate any part of tor information in item 10 of the Fir			
	1a, ORGANIZATION'S NAME					
	Anne Marie Hill Revocable Trust uad January 18, 2005 as amended and/or restated					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSON			NAL NAME(S)/INITIAL(S)	SUFFIX
1c.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
2801 NE 17th Ave		Portland		OR	97212-3313	USA
	DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use exact, full in name will not fit in line 2b, leave all of item 2 blank, check here and provide		modify, or abbreviate any part of t tor information in item 10 of the Fir			
	2a. ORGANIZATION'S NAME				•	<u> </u>
	·					
OR	. INDIVIDUAL'S SURNAME		IRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
2c.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3. 5	SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Pro	ovide only one Secured Party name	e (3a or 3b	o)	
	3a. ORGANIZATION'S NAME					
OR	U.S. Bank National Association					
	3b. INDIVIDUAL'S SURNAME .	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
800 Nicollet Mail 24th Floor		Minneapolis		MN	55402-7000	USA
<i>A</i> (	COLLATERAL. This financing statement covers the following collateral:	<u> </u>			<del></del>	

Account with number ending in 4300 in the name of Grantor at U.S. Bank National Association (and any successor thereto), together with (I) any and all replacements or renumbering of such account, and (II) any other account(s) established under, or related to, such accounts (including without limitation all 'sleeve' accounts, subaccounts and correspondent accounts and any account(s) to which any assets in the accounts described above are transferred), and all securities, instruments, financial assets, investment property, and other property held therein from time to time, all securities entitlements in and to the foregoing, all books and records relating thereto, and proceeds of the foregoing; whether any of the foregoing is owned now or acquired later; all additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing.

5. Check only if applicable and check only one box: Collateral is X 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:	6b. Check only if applicable and check only one box:						
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing						
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy	ver Bailee/Bailor Licensee/Licensor						
8. OPTIONAL FILER REFERENCE DATA:  XXXXX3265 OR SUPERIOR DATA:							