UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] LOAN SERVICING 503-485-2222 B. SEND ACKNOWLEDGMENT TO: (Name and Address) WILLAMETTE VALLEY BANK LOAN SERVICING DEPT P.O. BOX 2747 SALEM, OR 97308-2747		Page 1 Date: : Filed b	OT 3 L2/3 DY: WILL Record ANIA CO AEL GAR	5160057 6/2005 1; AMETTE VALLEY BAI ed in Official Re UNTY VISON	
L_		THE ADDITE OD	or lo Fá		
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1: 1a. ORGANIZATION'S NAME	a or 1b) - do not abbrevia		CE IS FO	R FILING OFFICE US	EONLY
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME		IMIDDLE	NAME	Leticely
BLAGG	GAIL		ANN	NAME	SUFFIX
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
1500 NW LAUREL HEIGHTS	ALBANY	- 1	OR	97321	USA
1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR Individual	1f. JURISDICTION	OF ORGANIZATION	[1g. ORG.	ANIZATIONAL ID#, if any	X NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one [2a, ORGANIZATION'S NAME]	debtor name (2a or 2b)	- do not abbreviate or combine r	ames		
28. ORGANIZATIONS NAME	K /			46	
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	•	MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	2f. JURISDICTION	OF ORGANIZATION	2g. ORG	ANIZATIONAL ID #, if any	NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO	R S/P) - insert only one:	secured party name (3a or 3b)			
3a. ORGANIZATION'S NAME Willamette Valley Bank				,	
OR 35. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NĀME	SUFFIX
		V	7		
3c. MAILING ADDRESS	СІТУ		STATE	POSTAL CODE	COUNTRY
4. This FINANCING STATEMENT covers the following collateral: 4. This FINANCING STATEMENT covers the following collateral:	Albany		OR	97321	USA
PURCHASE MONEY FOR All IMPROVEMENTS LOCATED A STATE OF WASHINGTON.; whether any of the foregoing is	owned now or ac	quired later; all accessi	ons, add	ditions, replacemer	nts, and
substitutions relating to any of the foregoing; all records of foregoing (including insurance, general intangibles and according to a substitution of the foregoing; all records of foregoing (including insurance, general intangibles and according to a substitution of the foregoing; all records of foregoing (including insurance, general intangibles and according to the foregoing).	ounts proceeds).			•	ny or uie
substitutions relating to any of the foregoing; all records of foregoing (including insurance, general intangibles and according to a substitution of the foregoing and according to a substitution of the foregoing; all records of foregoing (including insurance, general intangibles and according to a substitution of the foregoing; all records of foregoing (including insurance, general intangibles and according to a substitution of the foregoing; all records of foregoing (including insurance, general intangibles and according to a substitution of the foregoing (including insurance, general intangibles and according to a substitution of the foregoing (including insurance, general intangibles and according to a substitution of the foregoing (including insurance, general intangibles and according to a substitution of the foregoing (including insurance, general intangibles and according to a substitution of the foregoing (including insurance, general intangibles and according to a substitution of the foregoing (including insurance, general intangibles and according to a substitution of the foregoing (including insurance, general intangibles and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the foregoing (including insurance) and according to a substitution of the for	ounts proceeds).				
substitutions relating to any of the foregoing; all records of foregoing (including insurance, general intangibles and according to a substitution of the foregoing and including insurance, general intangibles and according to a substitution of the foregoing; all records of foregoing all records of foregoing; all records of foregoing (including insurance, general intangibles and according to the foregoing all records of foregoing (including insurance, general intangibles and according to the foregoing all records of foregoing (including insurance, general intangibles and according to the foregoing	ounts proceeds). O/9/ SIGNEE/CONSIGNOR	BAILEE/BAILOR S QUEST SEARCH REPORT(S) o L FEE] Spation	ELLER/BU	YER AG. LIEN	NON-UCC FILING Debtor 1 Debtor 2

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CC FINANCING STATEM DLLOW INSTRUCTIONS (front and bac						
. NAME OF FIRST DEBTOR (1a or 1		ATEMENT	1			
9a. ORGANIZATION'S NAME						
9b. INDIVIDUAL'S LAST NAME BLAGG	FIRST NAME GAIL	MIDDLE NAME, SUFFIX	T			
. MISCELLANEOUS:						
			THE ABO	VE SPACE IS FO	OR FILING OFFIC	E USE ONLY
. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only one	name (11a or 11b) - do not abbre	eviate or combine n	ames		
11a, ORGANIZATION'S NAME			<i>~</i> `	1 4		
7 116. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAM	E	SUFFIX
. MAILING ADDRESS		CITY	9		STAL CODE	COUNTRY
d <u>SEE INSTRUCTIONS</u> ADD'L INFO F ORGANIZATION DEBTOR	, NC	11f, JURISDICTION OF ORG	<u> </u>	11g. ORGANI	ZATIONAL ID#, if any	/ Non
ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME	TY'S og ASSIGNOR S/P'	S NAME - insert only one nam	ne (12a or 12b)		7	
12b, INDIVIDUAL'S LAST NAME		FIRST NAME	./	MIDDLE NAM	E	SUFFIX
c. MAILING ADDRESS		CITY		STATE PO	STAL CODE	COUNTRY
s. This FINANCING STATEMENT covers collaterat, or is filed as a fixture filing. □ Description of real estate: ■ XHIBIT 'A'	timber to be cut or as-extracted	16. Additional collateral desc	oription:	\		
. Name and address of a RECORD OWNER (if Debtor does not have a record interest):	R of above-described real estate					
		17. Check only if applicable a			y hald in trust	Decedents Estate
		Debtor is a Trust or 18. Check only if applicable a	Trustee acting with and check <u>only</u> one		y held in trust or	Decedent's Estat
		Debtor is a TRANSMITTIN	NG UTILITY			
		Filed in connection with a				
<u> </u>	<u></u>	Filed in connection with a	Public-Finance Tra	,	e for 30 years nancial Solutions	

EXHIBIT 'A'

Lot 191, as shown on the Plat and Survey entitled Records of Survey for Water Front Recreation, Inc., dated May 16, 1974, on file and of record under Auditor File No. 77523, in Book 'J' of Miscellaneous Records, Page 449, in the County of Skamania, State of Washington.

Together with any appurtenant easement as established in writing on said plat, for the joint use of the areas shown as roadways on the Plat.

Subject to reservations by the United States of America in approved Selection list number 259 dated March 4, 1953 and recorded September 4, 1953, in Book 52, Page 23, Auditor File No. 62114, Records of Skamania County as follows:

"...the provisions, reservation, conditions and limitation of Section 24, Federal Power Act of June 10, 1920, as amended and prior right of the United States, its licensees and permittees to use power purposes that part within Power projects No. 2071, 2111, and 264."