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 Book - 10402 Pg - 6180-6182  
 GARY W. OTT  
 RECORDER, SALT LAKE COUNTY, UTAH  
 CORPORATION SERVICE CO  
 801 ADLAI STEVENSON DR  
 SPRINGFIELD IL 62703  
 BY: LHA, DEPUTY - MA 3 P.

**UCC FINANCING STATEMENT**  
 FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294	
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
<input type="checkbox"/> 111577189 - 388310 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Utah (Salt Lake)

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				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	THAXTON	DAVID	C	
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
9714 S 575 E	SANDY	UT	84070	USA

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 2 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
	THAXTON	KATHLEEN	D	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
9714 S 575 E	SANDY	UT	84070	USA

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 Viewtech Financial Services, Inc.				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
4761 E. Hunter Ave.	Anaheim	CA	92807	USA

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

That certain photovoltaic solar electric generation system (including the inverter(s), photovoltaic panels and other personal property or fixtures integral thereto) installed or to be installed at 9714 SOUTH 575 EAST, SANDY UT 84070, together with (1) all attachments, accessions, tools, parts, supplies and additions to and all replacements of and substitutions for any property described above, whether now owned or hereafter acquired and (2) all the proceeds of the foregoing.

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

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

6b. Check only if applicable and check only one box:  
 Agricultural Lien  Non-UCC Filing

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

8. OPTIONAL FILER REFERENCE DATA:

111577189

# UCC FINANCING STATEMENT ADDENDUM

## FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME	
OR	
9b. INDIVIDUAL'S SURNAME	
THAXTON	
FIRST PERSONAL NAME	
DAVID	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
C	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME				
OR				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

11.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME				
OR				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)      14. This FINANCING STATEMENT:

covers timber to be cut   
 covers as-extracted collateral   
 is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

DAVID C. THAXTON AND KATHLEEN D. THAXTON, HUSBAND AND WIFE, AS JOINT TENANTS  
 9714 SOUTH 575 EAST, SANDY UT 84070

16. Description of real estate:

See Exhibit A

17. MISCELLANEOUS:

EXHIBIT A

THE FOLLOWING DESCRIBED TRACT OF LAND IN SALT LAKE COUNTY,  
STATE OF UTAH:

LOT 14, SANDY HEIGHTS NO. 3, ACCORDING TO THE OFFICIAL PLAT  
THEREOF ON FILE AND OF RECORD IN THE SALT LAKE COUNTY  
RECORDER'S OFFICE.

PPN: 28-07-277-021  
DAVID C. THAXTON AND KATHLEEN D. THAXTON, HUSBAND AND WIFE,  
AS JOINT TENANTS

9714 SOUTH 575 EAST, SANDY UT 84070  
Loan Reference Number : 113167  
First American Order No: 51027235  
Identifier:

