



W3333534

UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS

E# 3333534 PG 1 OF 4

LEANN H KILTS, WEBER CTY. RECORDER
22-JUL-24 256 PM FEE \$40.00 SED
REC FOR: CORPORATION SERVICE COMPAN

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294	
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
2864 10346 CSC 801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Utah (Weber)
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION	

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 POULSEN		FIRST PERSONAL NAME JANA	ADDITIONAL NAME(S)/INITIAL(S) LYNN	SUFFIX
1c. MAILING ADDRESS 5027 W 3300 S		CITY WEST HAVEN	STATE UT	POSTAL CODE 84401	COUNTRY 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 POULSEN		FIRST PERSONAL NAME RICHARD	ADDITIONAL NAME(S)/INITIAL(S) B	SUFFIX
2c. MAILING ADDRESS 5027 W 3300 S		CITY WEST HAVEN	STATE UT	POSTAL CODE 84401	COUNTRY 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 Credit Human Federal Credit Union					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 1703 Broadway		CITY San Antonio	STATE TX	POSTAL CODE 78215	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
All of the Debtor's right, title, and interest in all of the solar photovoltaic equipment and associated components at the address referenced in this filing, including but not limited to any solar panels, inverters, wiring, batteries, monitoring devices, and racking, and as may be further described in the associated UCC Secured Solar Loan Agreement and/or Retail Purchase Agreement signed by Debtor.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	
6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licenser	
8. OPTIONAL FILER REFERENCE DATA:	

2864 10346

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	
POULSEN	
FIRST PERSONAL NAME	
JANA	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
LYNN	

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):

JANA LYNN POULSEN
RICHARD B POULSEN
5027 W 3300 S
WEST HAVEN, UT 84401

16. Description of real estate:

A PARCEL OF LAND LOCATED IN THE STATE OF UT, COUNTY OF WEBER, WITH A SITUS ADDRESS OF 5027 W 3300 S, WEST HAVEN UT 84401-9616 R013 CURRENTLY OWNED BY POULSEN RICHARD B / POULSEN JANA L HAVING A TAX ASSESSOR NUMBER OF 08-037-0056 AND BEING THE SAME PROPERTY MORE FULLY DESCRIBED AS PART OF THE NORTHWEST QUARTER OF THE NORTHWEST QUARTER OF SECTION 5, TOWNSHIP 5 NORTH, RANGE 2 WEST, SALT LAKE BASE AND MERIDIAN, U.S. SURVEY: BEGINNING EAST 232

17. MISCELLANEOUS:

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OR	9b. INDIVIDUAL'S SURNAME	
	POULSEN	
	FIRST PERSONAL NAME	
	JANA	
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX
10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

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

16. Description of real estate:

FEET FROM THE NORTHWEST CORNER OF SAID SECTION 5, RUNNING THENCE EAST 215.5 FEET ALONG THE SECTION LINE, THENCE SOUTH 196 FEET PARALLELING THE WEST LINE OF SAID SECTION 5, THENCE WEST 215.5 FEET PARALLELING THE NORTH LINE OF SAID SECTION 5, THENCE NORTH 0D02'54" WEST 196 FEET TO THE POINT OF BEGINNING. SUBJECT TO THE COUNTY ROAD RIGHT-OF-WAY ACROSS THE NORTH APPROXIMATELY 33 FEET THEREOF. AND DESCRIBED IN DOCUMENT NUMBER

17. MISCELLANEOUS:

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OR
9b. INDIVIDUAL'S SURNAME

POULSEN

FIRST PERSONAL NAME

JANA

ADDITIONAL NAME(S)/INITIAL(S)

LYNN

SUFFIX

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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

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OR
11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

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14. This FINANCING STATEMENT:

covers timber to be cut

covers as-extracted collateral

is filed as a fixture filing

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16. Description of real estate:

1998.1550986 DATED 6/8/1998 AND RECORDED 6/9/1998.
APN: 08-037-0056
WEBER COUNTY

17. MISCELLANEOUS: