



Secretary of State
 Corporation Division - UCC
 255 Capitol St. NE, Ste. 151
 Salem, OR 97310-1327
 Phone: (503) 986-2200
 Fax: (503) 373-1166
 FilingInOregon.com

(Reserved for Filing Officer Use)

APL -1 Notice of Agricultural Produce Lien

In keeping with ORS 192.410-192.595, the information on the application is public record.

Pursuant to ORS 87.710

We must release this information to all parties upon request and it may be posted on our website.

Please Type or Print Legibly in **Black Ink**. Attach Additional Sheet if Necessary.

DEBTOR

CHECK ONE If Individual, list last name first.

PURCHASER: NAME 1 _____ -Business -Individual

NAME 2 _____ -Business -Individual

ADDRESS _____

CITY _____ STATE _____ ZIPCODE _____

PRODUCER:

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIPCODE _____

STATEMENT AMOUNT OF PRODUCER'S DEMAND (after Deducting All Credits and Offsets) : \$ _____

DESCRIPTION OF PRODUCE DELIVERED OR TRANSFERRED BY:

DATE PAYMENT ORIGINALLY DUE: _____

I hereby declare that the above statement is true to the best of my knowledge and belief, and that I understand it is made for use as evidence in court and is subject to penalty for perjury.

Signature of Claimant or Representative: _____

Printed Name: _____

RETURN TO (Please Type or Print within the box):

FEES

Required Processing Fee \$15.00 Processing Fees are nonrefundable.

Please make check payable to "Corporation Division."

NOTE:

Fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.