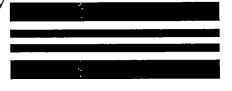
SUFFIX

COUNTRY

USA



## **UCC FINANCING STATEMENT**

SOLARCITY CORPORATION

3b. INDIVIDUAL'S SURNAME

3055 CLEARVIEW WAY

3c. MAILING ADDRESS

OR

**FOLLOW INSTRUCTIONS** 

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional)  CLS-CTLS_Glendale_Customer_Service@wolte	erskluwer.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	23974 - SOLARCITY
CT Lien Solutions P.O. Box 29071	50141857
Glendale, CA 91209-9071	NVNV
1	FIXTURE
File with: Douglas NV	

DOUGLAS COUNTY, NV

Rec:\$92.00 Total:\$92.00

CT LIEN SOLUTIONS

2015-869961

09/22/2015 12:34 PM

Pgs=3

KAREN ELLISON, RECORDER

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

ADDITIONAL NAME(S)INITIAL(S)

94402

POSTAL CODE

STATE

CA

1a. ORGANIZATION'S NAME	nere and provide the individual Debtor Information in item 10 of the				
		1			
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)		
HANSEN	MICHAEL	1	1		
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
1373 CHICHESTER DR	GARDNERVILLE	NV	89410	USA	
2a. ORGANIZATION'S NAME	here and provide the Individual Debtor information in item 10 of the	ne Financing Sta	atement Addendum (Fon	n OCCIAd)	
2b. INDIVIDUAL'S SURNAME HANSEN	FIRST PERSONAL NAME  CHERI	ADDITIO L	NAL NAME(S)/INITIAL(S)	SUFFIX	
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
1373 CHICHESTER DR	GARDNERVILLE	NV	89410	USA	
SECURED PARTY'S NAME (or NAME of ASSIGN	EE of ASSIGNOR SECURED PARTY): Provide only one Secured Part	ty name (3a or 3	b)		
3a, ORGANIZATION'S NAME		7			

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

4. COLLATERAL: This financing statement covers the following collateral: All energy generation systems and associated components at any time provided by SolarCity Corporation to Debtor. The Secured Party is not taking a security interest in the real property (except solely to the extent the foregoing is a fixture). The Secured Party's only security interest is in the specific collateral described in this section.

SAN MATEO

CITY

FIRST PERSONAL NAME

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:			6b. Check only if applicable and check only one box:					
Public-Finance Transaction	Manufactured-Home Transactio	n A Debtor is a Trans	smitting Utility	Agricultural Lien	Non-UCC Filing			
7. ALTERNATIVE DESIGNATION (if a	pplicable): X Lessee/Lessor	Consignee/Consignor	Seller/Buye	er Bailee/Bailor	Licensee/Licensor			
8. OPTIONAL FILER REFERENCE DATA:								
50141857 JB-894482-00 Hansen, Michael L.		0792 Reno						

## **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 HANSEN FIRST PERSONAL NAME MICHAEL ADDITIONAL NAME(S)/INITIAL(S) 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 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SVINITIAL(S) SUFFIX 10c. MAILING ADDRESS COUNTRY CITY STATE POSTAL CODE ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME 11a. ORGANIZATION'S NAME 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): 14. This FINANCING STATEMENT: 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 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 16. Description of real estate: (if Debtor does not have a record interest): MICHAEL L HANSEN A PARCEL OF LAND LOCATED IN THE STATE OF 1373 CHICHESTER DR NV, COUNTY OF DOUGLAS, WITH A SITUS GARDNERVILLE, NV 89410 ADDRESS OF 1373 CHICHESTER DR, GARDNERVILLE NV 89410-4819 R001 CURRENTLY OWNED BY HANSEN MICHAEL L & HANSEN CHERI L HAVING A TAX ASSESSOR NUMBER OF 1320-33-817-011 AND DESCRIBED IN DOCUMENT [ See Exhibit for Real Estate ] 17. MISCELLANEOUS: 50141857-NV-5 23974 - SOLARCITY SOLARCITY CORPORATION File with: Douglas, NV JB-894482-00 Hansen, Michael L. 0792 Reno

Debtor: HANSEN, MICHAEL, L

## Exhibit for Real Estate

16. Description of real estate: Continued

NUMBER 851104 DATED 09/29/2014 AND RECORDED 10/14/2014

