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DELAWARE COUNTY IOWA
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2003 JUL 24 PM 2:45
BOOK 2009 PAGE 3542
DEBORAH L. PEYTON
DELAWARE CO. RECORDER

10

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front, back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)
Kent A. Kluver (563) 927-4250

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Commodity Credit Corporation
C/O Delaware County FSA Office
200 South 12th St.
Manchester, Iowa 52057

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

OR 1b. INDIVIDUAL'S LAST NAME: Wilgenbusch | FIRST NAME: Charles | MIDDLE NAME: Joseph | SUFFIX:

1c. MAILING ADDRESS: 2557 140th Ave. | CITY: Ryan | STATE: Ia | POSTAL CODE: 52330 | COUNTRY: USA

1d. TAX ID #: SSN OR EIN | ADD'L INFO RE ORGANIZATION DEBTOR | 1e. TYPE OF ORGANIZATION | 1f. JURISDICTION OF ORGANIZATION | 1g. ORGANIZATIONAL ID #, if any ☐ NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR 2b. INDIVIDUAL'S LAST NAME: Wilgenbusch | FIRST NAME: Paula | MIDDLE NAME: Kaye | SUFFIX:

2c. MAILING ADDRESS: 2557 140th Ave. | CITY: Ryan | STATE: Ia | POSTAL CODE: 52330 | COUNTRY: USA

2d. TAX ID #: SSN OR EIN | ADD'L INFO RE ORGANIZATION DEBTOR | 2e. TYPE OF ORGANIZATION | 2f. JURISDICTION OF ORGANIZATION | 2g. ORGANIZATION ID #, if any ☐ NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME: Commodity Credit Corporation- Delaware County Farm Service Agency

OR 3b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX

3c. MAILING ADDRESS: 200 South 12th St. | CITY: Manchester | STATE: IA | POSTAL CODE: 52057 | COUNTRY: USA

4. This FINANCING STATEMENT covers the following collateral:

New 30-7 heavy MFS Bin, 8 roof vents, cement, Shivvers equipment, Circulator II 30', 10 hp motor for circulator, heater strip, 3 goove pulley for 10 hp motor, Cumpudry Command Center With Accessories, floor and supports, Blue flame dryer with transition and entrance collar, grain spreaders, basic CF auger, 20' extension, grain sampler and cleaner, roof brace, 3 hp motor, heater strip, 2 groove pulley, and electical wiring and all other attachments.

All proceeds, products, replacements, substitutions, additions, accessions and security acquired hereafter.

Disposition of such collateral is not hereby authorized.

5. ALTERNATIVE DESIGNATION (if applicable): | LESSEE/LESSOR | CONSIGNEE/CONSIGNOR | BAILEE/BAILOR | SELLER/BUYER | A.G. LIEN | NON-UCC FILING

6. [X] This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) | ☐ Check to REQUEST SEARCH REPORT(S) on Debtor(s) (for ADDITIONAL FEE) (optional) | All Debtors | Debtor 1 | Debtor 2

8. OPTIONAL FILER REFERENCE DATA

FILING OFFICE COPY - NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX
Wilgenbusch	Charles	Joseph

10. MISCELLANEOUS:

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11 b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

11d. TAX ID#: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID#, if any
				☐ NONE

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

OR

12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

12c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☒ fixture filing.

14. Description of real estate:

The west 1/2 of the SE 1/4, THe east 1/2 of the SW 1/4 and the SE 1/4 of the NW 1/4 of Section 10 TWP 88 North, Range 6 west of th 5th P.M.

16. Additional collateral description:

This is a fixture filing specifically covering a MFS dryer bin and all attached equipment located on the real estate specifically described at item 14 herein.

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

17. Check only if applicable and check only one box.

Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate

18. Check only if applicable and check only one box.

☐ Debtor is a TRANSMITTING UTILITY

☐ Filed in connection with a Manufactured-Home Transaction - effective 30 years

☐ Filed in connection with a Public-Finance Transaction - effective 30 years

FILING OFFICE COPY - NATIONAL UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 07/29/98)