Book 2012 Page 2729

Document 2012 2729 Type 10 011 Pages 3
Date 8/17/2012 Time 10:21:11AM
Rec Amt $17.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & ADDRESS OF CONTACT AT FILER (optional)
David Boyd, 515-251-2800

B. SEND ACKNOWLEDGMENT TO: (Name and Address)
Agricredit Acceptance LLC
P.O. Box 4000
Johnston, IA 50131-9854

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

2011-3279

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

	1a. ORGANIZATIONS NAME				
OR	1b. INDIVIDUAL'S LAST NAME **PUTZ**	FIRST NAME **EDWARD**	MIDDLE NAME **D**		SUFFIX
1c. MAILING ADDRESS **1368 310TH AVE**		CITY **NEW VIENNA**	STATE **IA**	POSTAL CODE **52065**	COUNTRY **USA**

1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any
		INDIVIDUAL		☒ NONE

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

	2a. ORGANIZATIONS NAME				
OR	2b. INDIVIDUAL'S LAST NAME PUTZ	FIRST NAME EDWARD	MIDDLE NAME DAVID		SUFFIX
2c. MAILING ADDRESS 1368 310TH AVE		CITY NEW VIENNA	STATE IA	POSTAL CODE 52065	COUNTRY USA

2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any
		INDIVIDUAL		☒ 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. ORGANIZATIONS NAME **AGRICREDIT ACCEPTANCE LLC**				
OR	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
3c. MAILING ADDRESS **P.O. BOX 2000**		CITY **JOHNSTON**	STATE **IA**	POSTAL CODE **50131-0020**	COUNTRY **USA**

4. This FINANCING STATEMENT covers the following collateral: (Make, Model, Desc, Serial #), together with all accessories, repairs, attachments and accessions thereto.

LELY, JUNO100, FEED PUSHER, 0003128150
LELY, , SET STRIPS,
LELY, , CHARGING STATION,

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

6. ☒ This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)

7. Check to REQUEST SEARCH REPORT(s) on Debtor(s) [ADDITIONAL FEE] [optional] ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2

8. OPTIONAL FILER REFERENCE DATA Nt Delaware Co St 101-374549 #1700

FILING OFFICE COPY – UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02)

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and 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
PUTZ	EDWARD	D

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - 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. SEE INSTRUCTIONS	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:

See exhibit "A" for legal description.

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

16. Additional collateral description:

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

EXHIBIT A
LAND DESCRIPTION

The following described real estate situated in the County of Delaware, State of Iowa, to-wit: South one half (S1/2) of the northeast quarter (NE1/4) of section twenty one (21) and the west ninty nine (99) acres of the south 139 acres of the west seven eighths (7/8) of the southwest quarter (SW1/4) of section twenty two (22) (except a strip of land ten (10) feet in width across the north end thereof), all in township ninety (90) north, range three (3), west of the 5th P.M., subject to easements of record.