[redacted]

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
LUANN MCQUILLEN 563-927-4475

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

FARMERS & MERCHANTS SAVINGS BANK
101 E. MAIN ST. PO BOX 588
MANCHESTER, IA 52057
(563) 927-4475

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DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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	FIRST NAME	MIDDLE NAME	SUFFIX
SCHNEIDER	LOGAN	M.	

1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
20179 258TH ST.	MANCHESTER	IA	52057	

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	FIRST NAME	MIDDLE NAME	SUFFIX

2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL 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
FARMERS & MERCHANTS SAVINGS BANK

OR

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

3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
101 E. MAIN ST. PO BOX 588	MANCHESTER	IA	52057	

4. This FINANCING STATEMENT covers the following collateral:

BILL OF SALE DATED 10-16-2012 BETWEEN LARRY A. MCNEAL AND PATRICIA G. MCNEAL, HUSBAND AND WIFE AND LOGAN M. SCHNEIDER CABIN ON LEASED LAND IN SCHNEIDER SUBDIVISION LOCATED NORTH OF RIVER IN SW 1/4 SE1/4 SECTION 23-88-5, DELAWARE COUNTY, IOWA; AND LOCALLY KNOWN AS 20723 257TH STREET, MANCHESTER, IOWA. INCLUDED IN THE SALE ARE THE BASS BOAT, MOTOR AND TRAILER; THE PONTOON BOAT, MOTOR AND TRAILER; THE 1998 CHEVROLET TRUCK, THE CONTENTS OF THE CABIN (EXCEPT INCIDENTAL ITEMS RETAINED BY SELLERS), THE BOAT HOUSE AND ALL SHEDS.

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

2012 - 3589

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

OR

9a. ORGANIZATION'S NAME		
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SUFFIX
SCHNEIDER	LOGAN	M.

10. MISCELLANEOUS:

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

OR

11a. ORGANIZATION'S NAME			
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)

OR

12a. ORGANIZATION'S NAME			
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:

CABIN ON LEASED LAND IN SCHNEIDER SUBDIVISION LOCATED NORTH OF RIVER IN SW 1/4 SE 1/4 SECTION 23-88-5, DELAWARE COUNTY, IOWA; AND LOCALLY KNOWN AS 20723 257TH STREET, MANCHESTER, IOWA.

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

BEVERLY SCHNEIDER TRUST
125 CRESCENT DRIVE
MANCHESTER, IA 52057

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