Form FHA 440–25
(Rev. 5–25–66)

Position 1

UNITED STATES DEPARTMENT OF AGRICULTURE

FARMERS HOME ADMINISTRATION

FINANCING STATEMENT

This statement is presented for filing pursuant to the Uniform Commercial Code. Please note filing information on the copy and return it to the Secured Party at its address shown below.

DEBTOR(S)	SECURED PARTY	For Filing Officer
Ralph W. Williams and *(Name)* Viola M. Williams, husband and wife *(Name)* RFD 1, Earlham, Iowa 50072 *(Mailing Address)*	UNITED STATES OF AMERICA acting through FARMERS HOME ADMINISTRATION POST OFFICE BOX 158 INDIANOLA, IOWA 50125 *(County Office Address)*	

1. This Financing Statement covers the following types or items of collateral, including proceeds and products thereof:

   (a) Crops, livestock, supplies, other farm products, farm equipment and inventory.

   (b) _____

2. Disposition of such collateral is not hereby authorized.

3. Crops covered hereby are growing or are to be grown on, and any goods covered hereby which are or are to become fixtures are or are to be affixed to, the following-described real estate:

Farm(s) or Other Real Estate * *Owner*	*Approximate No. of Acres*	*County and State*	*Approximate Distance and Direction From a Named Town*
Ralph W. Williams	80	Madison	11 miles NW from Winterset, Iowa
Ralph W. Williams	9	Madison	13 miles NW from Winterset, Iowa
Ralph W. Williams	80	Adair	18 miles NW from Winterset, Iowa

Ralph W. Williams
Ralph W. Williams *(Signature of Debtor)*

Viola M. Williams
Viola M. Williams *(Signature of Debtor)*

UNITED STATES OF AMERICA

By Archie F. Bridges
Archie F. Bridges

Title County Supervisor
Farmers Home Administration

*Record owner if required by State law, otherwise reputed owner.

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GPO 825–261

Williams

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BOOK ____ PAGE ____

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MARY E. WELTY
RECORDER
MADISON COUNTY, IOWA