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   FIRST NAME   SUFFIX										
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (mode and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]  E. SEND ACKNOWLEDGMENT TO: (Name and Address)  Commodity Credit Corporation Madison County Farm Service Agency 815 East Highway 92 Winterset, Iowa 50273  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1. DEDTOR'S EXACTFULL LEGAL NAME-Insertonly 2008 debtorname (Tao'1b)-donotabbreviate or combine names  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1. DEDTOR'S EXACTFULL LEGAL NAME-Insertonly 2008 debtorname (Tao'1b)-donotabbreviate or combine names  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABOVE SPACE								FILED N	0.=	2
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS from and backy CARFULLY  A NAME & PHONE OF CONTACT AT FILER (optional)  B. SEND ACKNOWLEDGMENT TO: (Name and Address)  Commodity Credit Corporation Madison County Farm Service Agency 815 East Highway 92 Winterset, Iowa 50273  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1.DEBTOR'S EXACT FULL LEGAL NAME-insert only gag debtor name (Ta or 10)- do not abbreviate or combine names  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1.DEBTOR'S EXACT FULL LEGAL NAME-insert only gag debtor name (Ta or 20)- do not abbreviate or combine names  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  THE ABO								ROOK <b>20</b>	<b>04</b> P/	16F 2
A NAME & PHONE OF CONTACT AT FILER [optional]  B. SEND ACKNOWLEDGMENT TO: (Name and Address)  Commodity Credit Corporation Madison County Farm Service Agency 815 East Highway 92 Winterset, Iowa 50273  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1. DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (1aor 1b) - do not abbreviate or combine names  1. DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (1aor 1b) - do not abbreviate or combine names  1. DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  1. SEEINSTRUCTIONS  1. A SOLUL 2  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and debtor name (2a or 2b) - do not abbreviate or combine names  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and										
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Madison County Farm Service Agency 815 East Highway 92 Winterset, Iowa 50273  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1. DEBTOR'S EXACT FULL LEGAL NAME insertionly gage debtor name (facility) - do not abbreviate or combine names  15. GORGANIZATION'S NAME  OR 15. INDIVIDUAL'S LAST NAME Schulz Donald Rex  16. MAILING ADDRESS 1192 280th Street Macksburg IA 50155~8013  16. SEEINSTRUCTIONS   ADDILINFO RE   16. TYPE OF ORGANIZATION   17. JURISDICTION OF ORGANIZATION   18. ORGANIZATION   18. ORGANIZATION   18. ORGANIZATION   18. ORGANIZATION   18. ORGANIZATION   19. ORGANIZATI	B. SEND ACKNOWLEDG	MENT TO: (Name	and Address)					17.5	ECORD	FR
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	815 East 1		2	Winter	set	IA	50.	273		

- A. 21872 bushel steel bin with perforated floor, aeration fan, spreader, stationary dryer with miscellaneous augers and unloading equipment.
- B. 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/	
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 Debt [applicable] 8. OPTIONAL FILER REFERENCE DATA	or(s) All Debtors Debtor 1 Debtor 2
6. OF HOMAL FILER REFERENCE DATA	

	C FINANCING S OW INSTRUCTIONS (fro	ont and back) CAREFULLY						
N/	AME OF FIRST DEBTO	R (1a or 1b) ON RELATED FINANC	ING STATEMENT					
9	9a. ORGANIZATION'S NAME							
RL								
\$	SCHULZ	FIRST NAME Donald	MIDDLE NAME Rex	SUFFIX				
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יו	1a. ORGANIZATION'S NAME							
R .	1b. INDIVIDUAL'S LAST NAM							
ľ		E	FIRST NAME	FIRST NAME		NAME	SUFFIX	
	MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY	
	OF DE	D'L INFO RE   11e. TYPE OF ORGANIZ GANIZATION BTOR	ATION 11f. JURISDICTION C	11f. JURISDICTION OF ORGANIZATION		11g. ORGANIZATIONAL ID#, if any		
.	ADDITIONAL SECUR: 2a. ORGANIZATION'S NAME	ED PARTY'S og ☐ ASSIGNO	R S/P'S NAME - insert only o	<u>ne</u> name (12a or 12b)			NON	
۱L								
1:	26. INDIVIDUAL'S LAST NAM	E	FIRST NAME	FIRST NAME		NAME	SUFFIX	
c. M	IAILING ADDRESS		CITY		07.75	Inaian aran		
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co	ollateral, or is filed as a 🏋 fi			ai dobotipiloti.				
	escription of real estate:	Out and any (NTEL 1777)	1	<b>.</b> .	~ · · · ·			
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		5) in Township 74	l spreade	r. station		er with mis		
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FILING OFFICE COPY — UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 05/22/02)