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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY	. (
A NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 662-4141	·	Document 2	2006	155	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address) 509208 ITE UCC Direct Services 700244 P.O. Box 29071	.	Book 2006 Pa	ige 155 1 00 6 T	Type 17 001 F ime 4:01 PM	Pages 2
Glendale, CA 91209-9071 IAIA FIXTU	RE _	MICHELLE UTS MADISON IOWA		OUNTY RECORDER	₹
File with: Madison, IA		THE ABOVE SPAC	E IS FOR FIL	ING OFFICE USE ONLY	
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name	(1a or 1b) - do not ab	breviate or combine nam	es.	,	
1a. ORGANIZATION'S NAME					
1b. INDIVIDUAL'S LAST NAME WELCH	FIRST NAME LARRY		MIDDLE !		SUFFIX
1c. MAILING ADDRESS 3015 NORTH JOHN WAYNE DRIVE	CITY WINTERSE	T .	STATE IA	50273	COUNTRY
1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR	1f. JURISDICTION	OF ORGANIZATION	1g. ORG	ANIZATIONAL 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 n	ames :	
2a. ORGANIZATION'S NAME	•				•
OR 2b. INDIVIDUAL'S LAST NAME WELCH	FIRST NAME NANCY		MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS 3015 NORTH JOHN WAYNE DRIVE	WINTERSE	Т	STATE	POSTAL CODE 50273	COUNTRY
2d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR	2f. JURISDICTION	OF ORGANIZATION	2g. ORG	ANIZATIONAL ID #, if any	NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIG	NOR S/P) - insert on	ly <u>one</u> secured party nam	e (3a or 3b) .	
3a. ORGANIZATION'S NAME WELLS FARGO FINANCIAL LEASING INC.	•	•			
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
3c MAILING ADDRESS PO BOX 4943	CITY SYRACUSE		STATE	POSTAL CODE 13221	COUNTRY

- 4. This FINANCING STATEMENT covers the following collateral:
- (1) 60 X 16 X 82 MORTON BUILDING, AS PER SECURITY AGREEMENT

				·	1 7 .
5. ALTERNATIVE DESIGNATION [if applicable] LESSEE/LESSOF	CONSIGNEE/CO	NSIGNOR BAILEE/BA	ILOR SELLER/BUYE	R AG. LIEN	NON-UCC FILING
6. [X] This FINANCING STATEMENT is to be filed [for record] (or record) ESTATE RECORDS. Attach Addendum		Check to REQUEST SEARC IADDITIONAL FEEL	H REPORT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA				•	
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INANCING STA	TEMENT A	DDEND	MU			•		2
OLLOW INSTRUCTIONS (ront and back) CARI	EFULLY	Civi		,	•		
NAME OF FIRST DEBTOR	₹ (1a or 1b) ON REL	ATED FINANCII	NG STATEM	ENT				
9a. ORGANIZATION'S NAME								
۹		`			_		•	
9b. INDIVIDUAL'S LAST NAM		ST NAME		MIDDLE NAME, SUFFIX				
WELCH	, L	ARRY						•
). MISCELLANEOUS								***
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le with: Madison, IA						-		
e with. Madison, IA			,		THE ABOVE SF	ACE IS FOR FILING	OFFICE USE ON	ILY
ADDITIONAL DEBTOR'S	EXACT FULL LEG/	AL NAME - inser	rt only one na	ame (11a or 11b) - do not	abbreviate or comb	ine names		
11a ORGANIZATION'S NA								
11b. INDIVIDUAL'S LAST N	AME			FIRST NAME		, MIDDLE NAME		.SUFFIX
		i			•			
L. MAILING ADDRESS				CITY		STATE POSTAL	CODE	COUNTRY
	•					. -		
d. SEE INSTRUCTION	ADD LINFO RE 11e:	TYPE OF ORGAN	IZATION	11f. JURISDICTION OF ORG	SANIZATION	11g. ORGANIZAT	IONAL ID #, if an	ıy
	ORGANIZATION	•					÷	NON
<u> </u>	DEBTOR			· · ·	·	1		
. ADDITIONAL SECU	JRED PARTY'S or	ASSIGNO	OR S/P's NA	ME - insert only one nam	e (12a or 12b)			-
12a. ORGANIZATION'S NA							Te	
	•					,		
12b. INDIVIDUAL'S LAST N	AME			FIRST NAME		MIDDLE NAME		SUFFIX
٠.								•
c. MAILING ADDRESS	. :			CITY		STATE POSTA	LCODE	COUNTRY
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3. This FINANCING STATEMEN	_ 🗀	to be cut or a	as-extracted	16. Additional collateral des	icription:	d		
collateral or is filed as a	fixture filing.					:		~
Description of real estate:						√ ,		
•		•	•			.3	,	
Description: Parcel B	FRL SW SW 29	32' X 497', S€	ection					
119, Township 076, R Vinterset WFD	ange 027, 3.34 a	acres. 400 00	UU UIIION					
VIIILEISEL VVI D				,		,		
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5. Name and address of a REC		described real esta	ate	,	•			
(if Debtor does not have a	ecord interest):	•	•			•		
	s	•		17. Check only if applicable	and check only one bo	ox. ₂		. :
			•	Debtor is a Trust or			I in trust or	Decedent's Esta
								- <u> </u>
				18 Check only if applies blo	and check only one bo	ox. ·		
•				18. Check only if applicable	•	эх.	χ.	
		, , , , , , , , , , , , , , , , , , ,		Debtor is a TRANSMIT	TING UTILITY		va 30 vaara	
		· · · · · · · · · · · · · · · · · · ·	;	l	TING UTILITY h a Manufactured-Home	e Transaction effect		