	Document 2009 994					
	Book Date Rec	Book 2009 Page 994 Type 17 001 Pa Date 4/07/2009 Time 10:35 AM Rec Amt \$7.00				
ICC FINANCING STATEMENT OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [options]] LOAN SERV[CING 800-775-8015	LIS/ MAD	LISA SMITH, COUNTY RECORDER MADISON IOWA				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)						
PO BOX 1647						
BELLEVUE, WA 98009-1647						
		BOVE SPACE IS FO	OR FILING OFFICE USE	ONLY		
DEBTOR'S EXACT FULL LEGAL NAME - Insert only gos debtor name (1a. ORGANIZATION'S NAME	1a or 1b) - do noi abbreviale or combine nam	185				
R TE. INDIVIDUAL'S LAST NAME	FIRST NAME		NAME	ISUFFIX		
BRINEY	SHERRI					
MAILING ADORESS	CITY	STATE	POSTAL CODE	COUNTRY		
110 S 10TH AVE	WINTERSET	IA I	50273			
1 TAX ID . SSN OR EIN ADD'L INFO RE 10. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	11. JURISDICTION OF ORGANIZATIO		ANIZATIONAL ID #, if any			
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only and 2a. ORGANIZATION'S NAME	e deblor name (2a or 2b) - do not abbreviate	or combine names				
R 26. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDOLE	NAME .	SUFFIX		
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
H. TAX ID #: SSN OR EIN ADD'L INFO RE 28. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	21. JURISDICTION OF ORGANIZATIO	N 29 ORG	ANIZATIONAL ID #, if any			
ORGANIZATION DEBTOR	· · · · · · · · · · · · · · · · · · ·		ANIZATIONAL ID #, If any			
ORGANIZATION DEBTOR	· · · · · · · · · · · · · · · · · · ·		ANIZATIONAL ID #, if any			
ORGANIZATION DEBTOR SECURED PARTY'S NAME (OF NAME OF TOTAL ASSIGNEE OF ASSIGNE (3a. ORGANIZATION'S NAME FIRST MUTUAL BANK	· · · · · · · · · · · · · · · · · · ·		04/03/			
ORGANIZATION CORGANIZATION SNAME (01 NAME 01 TOTAL ASSIGNEE OF ASSIGNE	OR S/P) - insert only <u>one</u> secured party name	s (3a or 3b)	04/03/	/2009		

4. This FINANCING STATEMENT covers the following collatoral:

WINDOWS

FIXTURE FILING

PARCEL ID: 820004100070000

LEGAL: LOT SEVEN (7) OF SECOND WEST COURT ADDITION TO THE TOWN OF WINTERSET, MADISON COUNTY, IOWA

SITUATE IN THE COUNTY OF MADISON, STATE OF IOWA

ADDRESS: 110 S 10TH AVE, WINTERSET IA 50273

			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 RE IADDITIONAL FEEL	EPORT(S) on Debior(s)	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	+ ~	1 Madi		TA
BRINEY, S 53-100050-00	····· Ý /	11/201	son	<u></u>

FILING OFFICE COPY --- NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)