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CC FINANCING STATEMENT							
LLOW (NSTRUCTIONS (front_back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional]		LISA SMITH, COUNTY RECORD MADISON COUNTY 10WA					
SEND ACKNOWLEDGMENT TO: (Name and Address)							
,							
COMMODITY CREDIT CORPORATION Madison County Farm Service Agency 815 East Highway 92 Winterset, IA 50273							
<u></u>	THE	ABOVE SPACE	IS FO	R FILING OFFICE USE (ONLY		
DEBTOR'S EXACT FULL LEGAL NAME - insert only gate debtor name (1a or 1a. ORGANIZATION'S NAME	r 1b) - do not abbreviate or combine nam	es					
15, INDIVIDUATS LAST NAME	FIRST NAME		ODLE	NAME '	SUFFIX		
Schulz	Donald		ex		100.7		
MAILING ADDRESS	CITY	ļ-		POSTAL CODE	COUNTRY	,	
92 280th Street	Macksburg		IA	50155-8013	`		
TAX ID #: SSN OR EIN ADD'L INFO RE 1e, TYPE OF ORGANIZATION ORGANIZATION DESTOR	16. JURISDICTION OF ORGANIZAT	10N [1g	. ORGA	ANIZATIONAL ID #, if any		NONE	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one de Ze. ORGANIZATION'S NAME	btor name (2a or 2b) - do not abbreviate	or combine names				·	
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	M	MIDDLE NAME		SUFFIX		
Schulz	Patty	Jo			}		
MAILING ADDRESS 92 280th Street	CITY Macksburg		IATE	POSTAL CODE 50155-8013	COUNTRY	r	
TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION	21. JURISDICTION OF ORGANIZA			ANIZATION ID #, if any			
DEBTOR						NONE	
SECURED PARTY'S NAME (or NAME OF TOTAL ASSIGNEE OF ASSIGNOR SA Sal ORGANIZATION'S NAME	P) - insert only <u>one</u> secured party name (3a or 3b)					
COMMODITY CREDIT CORPORATION							
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLÉ NAME		NAME	SUFFIX		
I MAILING ADDRESS	CITY	sı	TATE	POSTAL CODE	COUNTRY		
815 East Highway 92	Winterset		IA	500273			
This Financing Statement covers the following collateral: A - 21872 BUSHEL STEEL BIN WITH PERROFRAT MISCELLANEOUS AUGERS AND UNLOADING EQ B - ALL PROCEEDS, PRODUCTS, REPLACEMENTS, ACQUIRED HEREAFTER. C - DISPOSTIION OF SUCH COLLATERAL IS NOT	ULPMENT. SUBSTITUTIONS, ADDI					H	
This FINANCING STATEMENT is to filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable				BUYER A G. LIEN All Debtors		C FILING	
	[ADDITIONAL FEE]	(optional)		All Debtors D			
		= UUUT HINNO!		WEBSERT (LOUNDOC	·/ (NEV. U//	23/30)	
FILING OFFICE COPY ACKNOWLEDGMENT COPY	SEARCH REPORT COP	Y 🔲 DEE	STOR (COPY SECUR	RED PARTY	COPY	

OLLOW INSTRUCTIONS	STATEMENT ADD			_					
98. ORGANIZATION'S N	TOR (1a or 1b) ON RELATED F ME	INANCING STATE	AENT						
SCHULZ	· · · · · · · · · · · · · · · · · · ·		MIDDLE NAME, SUFFIX						
D. MISCELLANEOUS:		·		7					
				THE ABO	OVE SP	ACE IS FOR FILING	OFFICE USE O	NLY	
1. ADDITIONAL DEBTO	R'S EXACT FULL LEGAL NAMI AME	E - insert only one nam	ne (11a or 11 b) - do not abbrevæte	or combine nam	105				
R 118. INDIVIDUAL'S LAST	NAME	Ft	FIRST NAME		MIDDLE NAME		SUFFIX		
Ic. MAILING ADDRESS		a	ату		STATE	POSTAL CODE	COUNTRY		
d.TAXID#: SSN OR EIN	ADD'L INFO RE 118, TYPE OF O ORGANIZATION DEBTOR	RGANIZATION 11	111. JURISDICTION OF ORGANIZATION		11g, ORGANIZATIONAL ID#, If any		iny	y	
ADDITIONAL SECUI	RED PARTY'S or ASSIGN	OR S/P'S NAME-	insert only one name (12a or	12b)					
R 12b. INDIVIDUAL'S LAST	NAME	FI	RST NAME		MIDDLE	NAME	SUFFIX		
2c MAILING ADDRESS		CI	CITY		STATE	POSTAL CODE	COUNTR	COUNTRY	
collaterat or is filed as a [1. Description of real estate: The Northeast Northwest Qua Five (5) in T	ENT covers tumoer to be cut or or forture sking. Quarter (NE 1/4) arter (NW 1/4 of Secondship 74 North, Fifth P.M. all in Ma	and the	16. Additional collateral description: This is a fixture filing specifically covering a grain bin, with perforated floor, aeration fan, spreader, stationary dryer with miscelleneous augers and unloading equipment located on the real estate specifically described at Item 14 herein.						
, Name and eddress of a REC (if Debtor does not have a re	CORD OWNER of above-described re- locard interest):	17.	Check <u>only</u> if applicable and chec blor is a Trust or Truster	_	pect l ú proti	inperty held in torse or	Decadeni's Es	tote.	
			Check only if applicable and check Debtor is a TRANSMITTING UTIL Féeti in connection with a Manufa Filed in connection with a Public-	k <u>only</u> one box. .iTY :ctured-Home Tra	ensection	- effective 30 years	COORDON S CS		
FILING OFFICE COPY	ACKNOWLEDGMEN	т сову Г	NATIONAL UCC FINANCING SEARCH REPORT COPY	_	T ADDE		1Ad) (REV. 07/29		