

Filed June 19, 2015 at 8:30 o'clock A.M.
under provisions of Nebraska Uniform Commercial
Code, INST. NO. 2015-1792.

2015-1792
46-6

Chris M. Muro
REGISTER OF DEEDS

UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Farm Service Agency
2920 E Court Street
Beatrice, NE 68310

Pages 2 Doc Tax \$ _____ EX # _____
 Fee Amt \$ 10.50 Ck Pd \$ 10.50
 Cash PD \$ _____ Refund \$ _____
 Paid by #67 USTREAS Ck # 16667
 _____ Ck # _____

CUSTOMER CHG CODE _____
 RETURN TO #27 FARM SERVICE AGENCY
2920 E COURT STE 1
BEATRICE, NE 68310

TRACT INDEX ✓
 COMPUTER @
 COMPARED A
 PAGED

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S SURNAME Balderson	FIRST PERSONAL NAME Edward	ADDITIONAL NAME(S)/INITIAL(S) E	SUFFIX
1c. MAILING ADDRESS 1313 SW 14th Rd	CITY Cortland	STATE NE	POSTAL CODE 68381
		COUNTRY	

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S SURNAME Balderson	FIRST PERSONAL NAME Edward	ADDITIONAL NAME(S)/INITIAL(S) Elmer	SUFFIX
2c. MAILING ADDRESS 1313 SW 14th Rd	CITY Cortland	STATE NE	POSTAL CODE 68331
		COUNTRY	

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME
Commodity Credit Corporation

OR

3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 2920 E Court Street	CITY Beatrice	STATE NE	POSTAL CODE 68331
		COUNTRY	

4. COLLATERAL: This financing statement covers the following collateral:

- (A) ALL SUKUP 28,861 BUSHEL BIN, INSIDE LADDER AND OUTSIDE STAIRS, 10 HP 1 PH CENTRIFUGAL FAN, 10 18X18 ROOF VENTS, 8" POWER SWEEP WITH 16' VERTICAL, 1-10HP 1 PH MOTOR WITH PULLEY, 1 HAWK CUT FLOOR, 1-7 1/2HP 1PH MOTOR W/PULLEY, 1-10HP FAN TRANSITION, AND ALL RELATED GRAIN DRYING AND GRAIN HANDLING EQUIPMENT.
- (B) ALL PROCEEDS, PRODUCTS, REPLACEMENTS, SUBSTITUTIONS, ADDITIONS, ACCESSIONS, AND SECURITY ACQUIRED HEREAFTER.

DISPOSITION OF SUCH COLLATERAL IS NOT HEREBY AUTHORIZED.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:
 Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:
 Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:

2015-1792

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME	
OR	
9b. INDIVIDUAL'S SURNAME	
Balderson	
FIRST PERSONAL NAME	
Edward	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
E	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME					
OR					
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX	
10c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME					
OR					
11b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
11c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

<p>13. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)</p> <p>15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):</p> <p>Lloyd & Dorothy Balderson</p>	<p>14. This FINANCING STATEMENT:</p> <p><input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing</p> <p>16. Description of real estate:</p> <p>The following tract of real estate located in the South Half of the Southeast Quarter of Section 4, Township 6 North, Range 6 East of the 6th P.M., Gage County, Nebraska: Commencing in the Southeast Corner of the Southeast Quarter of said Section 4; thence North 800 feet; thence West 600 feet; thence South 800 feet to the South line of said Section 4; Thence East 600 feet to the point of beginning.</p>
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17. MISCELLANEOUS: