

STATE OF NEBRASKA
 COUNTY OF GAGE: ss.
 Filed May 11th, 2017 at 8:30 o'clock A.M.
 under provisions of Nebraska Uniform Commercial
 Code. INST. NO. 2017-1392.
 Donna S. Munoz Register of Deeds

2017- 1392

4-6-6

UCC FINANCING STATEMENT
 FOLLOW INSTRUCTIONS

Donna S. Munoz
 Deputy

Pages 2 Doc Tax \$ _____ EX # _____

Fee Amt \$ 10.50 Ck Pd \$ 10.50

Cash PD \$ _____ Refund \$ _____

Paid by #67 US Treas Ck # 85633

_____ Ck # _____

CUSTOMER CHG CODE _____

RETURN TO #27 Farm Service Agency

TRACT INDEX _____
 COMPUTER _____
 COMPARED _____
 PAGED _____

ENV. _____

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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

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
68331

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
68310

COUNTRY

4. COLLATERAL: This financing statement covers the following collateral:
36' x 7 ring Sukup bin 25' 9" Eave height, 36'8" peak ht. 36' diameter 24,822 Bushel max capacity with floor, Inside ladder, 6 gooseneck roof vents, 1 36' Hawk cut channel lock floor, flashing and 538 supports, 1 10-hp 1ph. Centrifugal fan, 36' power sweep with 7.5-hp 1ph. Motor with pulleys, tax, concrete, freight, labor, and electrical.

ALL GRAIN STORAGE, GRAIN DRYING AND GRAIN HANDLING EQUIPMENT.

ALL GRAIN STORAGE, 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:

2017- 1392

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):

13. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT: <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
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): Lloyd & Dorothy Balderson	16. Description of real estate: The South Half of the Southeast Quarter of Section 4, Township 6 North, Range 6 East of the 6th P.M., Gage County, Nebraska. EXCEPT a tract more particularly described as Commencing at 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.

17. MISCELLANEOUS: