

Recorded: 6/8/2021 at 2:38:30.0 PM
County Recording Fee: \$17.00
Iowa E-Filing Fee: \$3.00
Combined Fee: \$20.00
Revenue Tax:
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2021 PG: 2091

UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Jessica Bergfeld 563-927-3159
B. E-MAIL CONTACT AT FILER (optional)
C. SEND-ACKNOWLEDGMENT TO: (Name and Address) Farm Credit Services of America 1301 W Main St Manchester, IA 52057

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 Duddeck	FIRST PERSONAL NAME Jenna	ADDITIONAL NAME(S)/INITIAL(S) Lynn	SUFFIX	
1c. MAILING ADDRESS 3027 160th St	CITY Dyersville	STATE IA	POSTAL CODE 52040	COUNTRY USA

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 Duddeck	FIRST PERSONAL NAME Richard	ADDITIONAL NAME(S)/INITIAL(S) Andrew	SUFFIX	
2c. MAILING ADDRESS 3027 160th St	CITY Dyersville	STATE IA	POSTAL CODE 52040	COUNTRY USA

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 Farm Credit Services of America, FLCA				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 1301 W Main St	CITY Manchester	STATE IA	POSTAL CODE 52057	COUNTRY USA

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

Accounts, Deposit Accounts, General Intangibles, and Other Rights to Payment: All accounts, deposit accounts, contract rights, general intangibles, chattel paper, documents, instruments, money, and other rights to payment, from any and all sources including, but not limited to, all federal and state government farm program subsidy payments.

All assets associated with the hog building(s) including but not limited to feeders, waters, gating, bulk bins, fans, heaters, scales, and chutes located in Parcel E in the NW1/4 - NW1/4 of Sec. 32, being part of Parcel C in T89N, R3W of the 5th P.M., Delaware County, Iowa according to plat recorded in Book 2007, Page 1180.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: ☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility	
6b. Check <u>only</u> if applicable and check <u>only</u> one box: ☐ Agricultural Lien ☐ Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:	

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

Duddeck

FIRST PERSONAL NAME

Jenna

ADDITIONAL NAME(S)/INITIAL(S)

Lynn

SUFFIX

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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

RJ Pork, Inc.

OR 10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

3027 160th St.

CITY

Dyersville

STATE

IA

POSTAL CODE

52040

COUNTRY

USA

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. ☐ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

☐ covers timber to be cut ☐ covers as-extracted collateral ☐ 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):

**Jason M Domeyer & Jennifer L Domeyer
2920 210th St.
Earlville, IA 52041**

16. Description of real estate:

**Parcel E in the NW1/4 - NW1/4 of Sec. 32, being part of
Parcel C in T89N, R3W of the 5th P.M., Delaware
County, Iowa according to plat recorded in Book 2007,
Page 1180**

17. MISCELLANEOUS:

UCC FINANCING STATEMENT ADDENDUM

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9a. ORGANIZATION'S NAME

OR 9b. INDIVIDUAL'S SURNAME

Duddeck

FIRST PERSONAL NAME

Jenna

ADDITIONAL NAME(S)/INITIAL(S)

Lynn

SUFFIX

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10a. ORGANIZATION'S NAME

Domeyer Farms, Inc.

OR 10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

2920 210th St

CITY

Earlville

STATE

IA

POSTAL CODE

52041

COUNTRY

USA

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)

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11c. MAILING ADDRESS

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17. MISCELLANEOUS: