1730
١
22
0
d

Rylie Waite . E-MAIL CONTACT AT FILER (optional)	E	Book 2022 Page 2544				
		Document 2022 2544 Type 10 011 Pages Date 8/25/2022 Time 9:58:42AM				
C. SEND-ACKNOWLEDGMENT TO: (Name and Address) Commodity Credit Corporation c/o Delaware County Farm Service Agency 200 South 12th St Manchester, IA 52057		Rec Amt \$12.00 Daneen Schindler, RECORDER/REGISTRAL DELAWARE COUNTY IOWA				
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (to name will not fit in line 1b, leave all of item 1 blank, check here						
1b. INDIVIDUAL'S SURNAME Funke	FIRST PERSONAL NAME James		ADDITIONAL NAME(S)/INITIAL(S) Francis			
. MAILING ADDRESS 071 Laser Rd	Edgewood	STAT IA		COUNTR		
. MAILING ADDRESS 071 Laser Rd SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASS 3a. ORGANIZATION'S NAME Commodity Credit Corporation	Edgewood IGNOR SECURED PARTY): Provide only on	STATILE STATIL	52042	USA		
I ammodity (redit (arnoration	FIRST PERSONAL NAME	ADD	ADDITIONAL NAME(S)/INITIAL(S)			
35. INDIVIDUAL'S SURNAME						
3b. INDIVIDUAL'S SURNAME MAILING ADDRESS COLLATERAL: This financing statement covers the following colli	CITY steral:	STAT				
3b. INDIVIDUAL'S SURNAME MAILING ADDRESS	n bin shell & roof, aerat ders, anchors, 6" basic w auger extens 20, 6" qu ition f/bl flame, turbo be eplacements, substitution	ion floor, fans d horiz. transfer had star truss, o poster 1 phase, ns, additions, ad	& accessories, un auger w/ super ho louble, 5hp 1 pha concrete, all othe	opper, (ise r		
3b. INDIVIDUAL'S SURNAME COLLATERAL: This financing statement covers the following collaboration of the following statement covers the following collaboration of the following statement covers the following collaboration of the following statement of the following statement of the following statement of the following collaboration of the	n bin shell & roof, aerat ders, anchors, 6" basic w auger extens 20, 6" qu ition f/bl flame, turbo be eplacements, substitution	ion floor, fans d horiz. transfer had star truss, o poster 1 phase, ns, additions, ad	& accessories, un auger w/ super ho louble, 5hp 1 pha concrete, all othe	op is:		

UCC FINANCING STATEMENT ADDENDUM

9. NAME OF FIRST DESTOR. Same as for 1s at the or Products Bilderhand II live 1s was left blank because individual better rame for not 8, check here 9. ORGANIZATIONS NAME PRINT PERSONAL NAME 10. DESTOR'S NAME: Provide (10s or 100) only does additional better name or better rame that did not fit in line to 2 b of the Preside Statement (Form UCCT) (see seart, fluf name does not not, motify, or abbreviate any part of the Debter's name) and other the mailing address in line 10c 10. DESTOR'S NAME: Provide (10s or 100) only does additional better name or better rame that did not fit in line to 2 b of the Presidency Statement (Form UCCT) (see seart, fluf name of not, motify, or abbreviate any part of the Debter's name) and other the mailing address in line 10c 10. DESTOR'S NAME: Provide (10s or 10s) only does additional or name that did not fit in line to 2 b of the Presidency Statement (Form UCCT) (see seart, fluf name of not, motify, or abbreviate any part of the Debter's name) and other the mailing address in line 10c 10s. ROMONIZATIONS NAME: Provide (10s or 10s) only does address in line 10c 10s. ROMONIZATION STATEMENT STATE POSTAL GODE COUNTRY 10s. MALING ADDRESS CITY STATE POSTAL GODE COUNTRY 11s. ROMONICAL STATEMENT Is to be filled (for record) (or neconded) in the 1st 11s. MALING ADDRESS CITY STATE POSTAL GODE COUNTRY 11s. MALING ADDRESS CITY	FOLLOW INSTRUCTIONS					
DR DROMONDUAL'S SURMANE France Figs personal make James ADDITIONAL NAME(S)WITHAL(S) France 10. DEBTOR'S NAME: Provide (the or 100) only gaze additional Debtor name or Debtor name but did not fit in firs the or 26 of the Financing Statement (Form UCC1) (use exact, full name do not ont modify, or addressible any part of the Debtor's name) and enter the making address in line 10s. 10s. GRGANIZATION'S NAME NOWIDUAL'S AURENAME NOWIDUAL'S AURENAME NOWIDUAL'S ADDITIONAL NAME(S)WRITIAL(S) 11s. GRGANIZATION'S NAME WALRING ADDRESS CITY STATE POSTAL CODE COUNTRY 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. GRGANIZATION'S NAME PROVIDED PARTY'S NAME: Provide only gaze name (1 to or 11b) 11s. MALING ADDRESS CITY STATE POSTAL CODE COUNTRY 11s. MALING ADDRE	NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing States because Individual Debtor name did not fit, check here.	ment; if line 1b was left blank				
Funk. Francis ADDITIONAL NAME (SWINTIALLS) Francis THE ABOVE SPACE IS FOR FILMS OFFICE USE ONLY THE ABOVE SPACE IS FOR FILMS OF IN THE ABO						
Funk First PERSONAL NAME James ADDITIONAL NAME(S)INITIAL(S) Francis ADDITIONAL NAME(S)INITIAL(S) Francis ADDITIONAL NAME(S)INITIAL(S) Francis ADDITIONAL NAME(S)INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE						
Funk First PERSONAL NAME James ADDITIONAL MAKE(S)NINTIAL(S) Francis 10. DESTOR'S NAME: Provide (foe or 106) only gas additional Debtor name or Debtor name had did not fit in the 15 or 25 of the Financing Statement (Form UCC1) (use awast, full name doe not not, motily, or ablevious any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL MAKE(S)NINTIAL(S) 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11t. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only open name (11a or 11b) 11a. ORGANIZATION'S NAME POSTAL CODE COUNTRY 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL SAURAME FIRST PERSONAL NAME FI						
FIRST PERSONAL NAME James	OR 9b. INDIVIDUAL'S SURNAME					
James ADDITIONAL NAME(S)INITIAL(S) Francis 10. DESTOR'S NAME: Provide (11s or 100) only gone additional Dictor name or Debtor name that did not 8 in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name do not entire, londly or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10b. RORGAN(ZATION'S NAME 10c. MAILING ADDRESS 10c. MAILING ADDRESS ADDRE						
ADDITIONAL NAME(S)INITIAL(S) Francis 10. DEBTOR'S NAME: Provide (10e or 10b) only one additional Debtor name or Debtor name that did not fit in fine 15 or 26 of the Financing Statement (Form UCC1) (use exact, full name do not not), mostly, or abheviate any part of the Debtor's name) and enter the molling address in line 10c. 10a, ORGANIZATION'S NAME 10b, INDIVIDUAL'S SURNAME 10c, MAILING ADDRESS 10c, MAILING ADDRESS 10d, ORGANIZATION'S NAME 10d, INDIVIDUAL'S SURNAME 10d, INDIVIDUAL'S SURNAME 11d, ORGANIZATION'S NAME 11d, NAMING ADDRESS 11d, NAMING ADDRESS 11d, ORGANIZATION'S NAME 11d, NAMING ADDRESS 11d, NAMING A						
Francis The ABOVE SPACE IS FOR FILING OFFICE USE ONLY		GUEERY				
10. DESTOR'S NAME: Provide (10s or 10b) only one additional Debtor name or Debtor rame that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name do not not mischligh, or abbrivation any part of the Debtor's name) and enter the mailing address in line 10c 10s. ORGANIZATION'S NAME 10c. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S SURNAME IT STATE POSTAL CODE COUNTRY 11s. ORGANIZATION'S NAME OR 11s. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(SYNITIAL(S) SUFFIX 11s. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11s. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11s. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11s. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 11s. IT his FINANCING STATEMENT: COVERS tamber to be cut covers as-extracted collateral To covers timber to be cut covers as-extracted collateral To covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers timber to be cut covers as-extracted collateral To be covers t		501111	TUE ABOVE	CDACE	IS EOD EII ING OFFICE	HEE ONLY
This Financing Statement is to be filled flor record (or recorded) in the 14. This Financing Statement. ADDITIONAL SPACE FOR ITEM 4 (Colleteral): This Financing Statement is to be filled flor record (or recorded) in the 16 (f) Debtor does not have a record internal. Suffix State Postal code Country	10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor n	ame or Debtor name that did not fit in				
OR 106. INDIVIDUAL'S SURNAME INDIVIDUAL'S PIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINTITAL(S) 100. MAILING ADDITIONAL SECURED PARTY'S NAME OF ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11s or 11b) 11st. ORGANIZATION'S NAME 11st. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINTITAL(S) SUFFIX 11st. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINTITAL(S) SUFFIX 11st. INDIVIDUAL'S SURNAME ADDITIONAL NAME(SYINTITAL(S) SUFFIX 11st. INDIVIDUAL'S ADDITIONAL SPACE FOR ITEM 4 (Colleteral): 11st. INDIVIDUAL'S ADDITIONAL NAME(SYINTITAL(S) SUFFIX 11st. INDIVIDUAL'S ADDIT	do not omit, modify, or abbreviate any part of the Debtor's name) and ente	er the mailing address in line 10c				
INDIVIDUAL'S PIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S) 10c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11. □ ADDITIONAL SECURED PARTY'S NAME ITIS. ORGANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11c. MAILING ADDRESS 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11c. MAILING ADDRESS 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11c. MAILING ADDRESS 11c. MAILING ADDRESS This FINANCING STATEMENT: □ covers timber to be out □ covers as-extracted collateral IV is filed as a fixture filing 11c. Mailing Address of a RECORD GWNER of real estate described in item 16 (If Debtor does not have a recool interest) Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 The East 1/2 of the Southeast 1/4 of Section 12, Township 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware County, Iowa.	10a. ORGANIZATION'S NAME					
10c. MAILING ADDRESS CITY	OR 10b. INDIVIDUAL'S SURNAME	-	·			-
10c. MAILING ADDRESS CITY						
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 FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 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) 15. Name and address of a RECORD OWNER or real estate described in item 16 (To befor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057	INDIVIDUAL'S FIRST PERSONAL NAME					 -
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 FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 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) 15. Name and address of a RECORD OWNER of real estate described in tien 16 (to Debtor close on thew a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL (S)					CHECK
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11s or 11b) 11s. ORGANIZATION'S NAME OR 11s. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(\$)/INITIAL(\$) 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 less is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in Item 15 (if Description of real estate): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 STATE POSTAL CODE COUNTRY 14. This FINANCING STATEMENT: covers as-extracted collateral less is filed as a fixture filing 16. Description of real estate: The East 1/2 of the Southeast 1/4 of Section 12, Township 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware Country, Iowa.			,			SUPPIX
11a. ORGANIZATION'S NAME Titb. INDIVIDUAL'S SURNAME	10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11a. ORGANIZATION'S NAME Titb. INDIVIDUAL'S SURNAME						
This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)		SIGNOR SECURED PARTY	S NAME: Provide o	nly <u>one</u> na	ame (11a or 11b)	
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORD (or recorded) in the (f) Debtor does not have a record interest): 15. Name and address of a RECORD OWNERS): 16. Name and address of a RECORD OWNERS): 17. Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 18. This FINANCING STATEMENT: Covers timber to be cut Covers as-extracted collateral	11a. ORGANIZATION'S NAME					
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 as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers	OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
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 as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers timber to be cut covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers as-extracted collateral is filed as a fixture filing covers						
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 18 (if Debtor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 16. Description of real estate: The East 1/2 of the Southeast 1/4 of Section 12, Township 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware County, Iowa.	11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral if is filed as a fixture filing 16. Description of real estate: The East 1/2 of the Southeast 1/4 of Section 12, Township 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware County, Iowa.	42 ADDITIONAL GRADE FOR ITTIMA (O. II.)					<u> </u>
15. Name and address of a RECORD OWNER of real estate described in Item 16 (if Debtor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 Covers timber to be cut Covers as-extracted collateral Image	12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	,				
15. Name and address of a RECORD OWNER of real estate described in Item 16 (if Debtor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 Covers timber to be cut Covers as-extracted collateral Image						
15. Name and address of a RECORD OWNER of real estate described in Item 16 (if Debtor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 Covers timber to be cut Covers as-extracted collateral Image						
Teal estate records (if applicable) 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 16. Description of real estate: The East 1/2 of the Southeast 1/4 of Section 12, Township 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware County, Iowa.		,				
Teal estate records (if applicable) 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 16. Description of real estate: The East 1/2 of the Southeast 1/4 of Section 12, Township 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware County, Iowa.						
Teal estate records (if applicable) 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 16. Description of real estate: The East 1/2 of the Southeast 1/4 of Section 12, Township 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware County, Iowa.						
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 16. Description of real estate: The East 1/2 of the Southeast 1/4 of Section 12, Township 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware County, Iowa.		in the 14. This FINANCING STATE	MENT:			
Michael J Funke Revocable Trust 1008 Clearview Dr Manchester, IA 52057 The East 1/2 of the Southeast 1/4 of Section 12, Township 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware County, Iowa.			<u> </u>	xtracted	collateral 📝 is filed as a	fixture filing
1008 Clearview Dr Manchester, IA 52057 90 North, Range 5, West of the Fifth P.M., except the railroad right of way, Delaware County, Iowa.	(if Debtor does not have a record interest):			. 4 / 4	60 4 40 7	
Manchester, IA 52057 railroad right of way, Delaware County, Iowa.						
						t tne
	Manchester, 1A 32037	ramoad right o	i way, Delav	vare	County, Iowa.	
43.100.000.0000						