STATE OF GEORGIA A ABAMOL

UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1 (Revised 1/1/1995)

Form must be typed. Read instructions on back before filling out form.

THIS FINANCING STATEMENT IS PRESENTED TO A FILI TO THE UNIFORM COMMERCIAL CODE, STATE OF GEO				·
1A. Debtor Name and Mailing Address:	Individual (Last, First, Middle Name)  Business (Legal Business Name)			
BARBER, JIMMY L.		ŀ	· ·	
691 HWY 467				
VINCENT, AL 35178			<u>1</u>	W I K W
C. Estas Casial Casuaku (Tau ID #	1C. Check if exempt under Item 6			
IB. Enter Social Security /Tax ID #	☐ Individual (Last, First, Middle Name)	∤	•	* 4 23
2A. Debtor Name and Mailing Address:	☐ Business (Legal Business Name)			
				# 3 5 E S
			<b>b n</b>	
				Ö al "
			ABOVE SPACE FOR RECORDING	
2B. Enter Social Security /Tax ID #	2C. Check if exempt under Item 6		Assignee Name and Mailing Address	☐ Individual (Last, First, Middle Name)
3A. Debtor Name and Mailing Address:	Individual (Last, First, Middle Name)			Business (Legal Business Name)
	☐ Business (Legal Business Name)			
			•	
		İ		
		_	The state of the s	11.0.402(0): Einancing Statement filed to
	3C. ☐ Check if exempt under Item 6	4	Exceptions for Social Security/Tax ID# — O.C.G.A. perfect a security interest in collateral already subject when it is brought into this state or when the debtor's lo	t to a security interest in another jurisdiction
4. Secured Party Name and Malling Address:	☐ Individual (Last, First, Middle Name)	<b> </b>	is not required to have such a number.	4 4-15-4 5- O C C A 15 O 100 pp.
DEERE & COMPANY	KBusiness (Legal Business Name)	7.	Check Only if BOTH: (i) Collateral is consumer (ii) the secured obligation is originally \$5,000 or i	
1415-28TH ST., PO BOX 65090	)		YEAR) or state "None"	
WEST DES MOINES, IA 50265		,8.	At the Mark to the second seco	
		<b>.</b>	A. D Collateral on Consignment.	•
	1		B. Collateral on Lease.	······································
9A. This financing statement covers the following types or	Items of collateral:			9C. Enter collateral code(s) from back of form that best describes collateral
			•	covered by this filling:
				0700
1 U JD 4455 TRACTOR W/DUALS	<b>;</b>	R	W4455H023354	
•				
				9D. Number of additional sheets
9B. Products of collateral are also covered.	AMOUNT OF DEBT	2	6124.48	presented:
10. Check if applicable and include reasonable description				<u></u>
A. Crops growing or to be grown. B. Minerals or	the like (including oil and gas) or accounts	ts su	bject to O.C.G.A. 11-9-103(5). C.□ Fixture filing purse	uant to Q.C.G.A. 11-9-313.
11. Name of the Record Owner(s) or Record Lessee(s) (#	debter does not have an interest of record	d in t	he real estate):	
				<u> </u>
12. County or Counties in which the affected real estate is	i located (Must be identified if filling covers	s cro	ps, mineral or fixtures):	
······································				
13. This statement is filed without the debtor's signature t				
A.   already subject to a security interest in another j				
B. which is proceeds of the original collateral descr	ibed above in which a security interest was	as pe	rrected;	
C. as to which the tiling has lapsed;	f., a., a.			
D. [] acquired after a change of debtor's name, identify	•	with C	1 C G 4. 11-9-402(1).	
described in a security agreement / real estate in     Signature(s) of Debtor(s)	willyage attached hereto in accordance wi		15) Signature(s) of Secured Party(ies)	<u> </u>
1. Organization of Departury				
Ain 2 Ball	·		JOHN DEERE CO.	
16. Return Copy To: Name and Address			ATATE OF OF OPPOUR	NIANOINO OTATEREENT

JOHN DEERE COMPANY PO BOX 65090 WEST DES MOINES, IA 50265 STATE OF GEORGIA - FINANCING STATEMENT

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