



UNIFORM COMMERCIAL CODE FINANCING STATEMENT STANDARD UCC-1/CNS-1
NORTH DAKOTA SECRETARY OF STATE/REGISTERS OF DEEDS
SFN 14009 (10-91)

PLEASE TYPE. PLEASE READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM.

A. File In

☐ UCC Index ☐ Farm Products Central Notice (CNS)

B. Customer Billing Number

C. Submitted By Facsimile

FAX #

D. Transmitting

Utility

E. DEBTOR NAME (if individual last name first)

Social Security Number or TIN

1. Arneson, Bradley L.

ADDRESS: 306 Morning Sun Dr, Birmingham, Al 35242

2. _____

ADDRESS: _____

3. _____

ADDRESS: _____

Reserved for Filing Officer Use

F. SECURED PARTY NAME AND ADDRESS (from which security info is obtainable)

G. ASSIGNEE NAME AND ADDRESS (if any)

United Federal Credit Union
808 East Front St.
Buchanan, MI 49107

SSN/TIN:

Telephone #: 616-695-0116

SSN/TIN:

Telephone #: _____

H. Check If Covered:

- ☐ PROCEEDS
☐ PRODUCTS

I. This financing statement covers the following collateral: (If crops, mark box ☐ and include legal description of real estate.)

1 - 1999 Polaris SLTX Personal Watercraft #USPLE04064L899

1 - 1999 Yacht Club Trailer #4H1001313X0255899

J. COLLATERAL CATEGORIES:

(Instructions on Back of Form)

K. Debtor Signature

Bradley L. Arneson

By: _____ By: _____ By: _____

DEBTOR'S SIGNATURE NOT REQUIRED. This statement is filed without the debtor's signature to perfect a security interest in collateral (check applicable box):

- (1) ☐ Collateral already subject to a security interest in another jurisdiction, when: ☐ Debtor moved to ND ☐ Collateral brought into ND; (3) ☐ Collateral acquired after a change of name, identity or corporate structure of debtor; or (4) ☐ Collateral as to which the filing has lapsed. Original File # _____
- (2) ☐ Proceeds of the described original collateral already perfected;

L. United Federal Credit Union

Signature of Secured Party

By: Mary Stuck, Branch Manager

FARM PRODUCTS CENTRAL NOTICE CNS-1

This FARM PRODUCT Central Notice filing is presented to the filing officer pursuant to NDCC 41-09-28. Signature of Debtor and Secured Party required.

M. COUNTY CODE	FARM PRODUCT CODE	DESCRIPTION (if applicable)	CROP YEAR (if applicable)	QUANTITY (if applicable)	M. COUNTY CODE	FARM PRODUCT CODE	DESCRIPTION (if applicable)	CROP YEAR (if applicable)	QUANTITY (if applicable)
1.	—	—	—	—	2.	—	—	—	—
3.	—	—	—	—	4.	—	—	—	—
5.	—	—	—	—	6.	—	—	—	—

N. Debtor Signature

By: _____ By: _____ By: _____

Secured Party Signature

By: _____

RETURN ACKNOWLEDGEMENT COPY TO: (name and address)

Please do not type outside of bracketed area

ORIGINAL - Filing Office
COPY 1 - Acknowledgment
COPY 2 - Filing Party
COPY 3 - Filing Party