



**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  D. Transmitting Utility  
 FAX #

E. DEBTOR NAME (if individual last name first) Social Security Number or TIN

1. Arneson, Brad

ADDRESS: 171 Spring Dr, Shelby, AL 35143

2. Arneson, Tammy

ADDRESS: 171 Spring Dr, Shelby AL 35143

3.

ADDRESS:

Reserved for Filing Officer Use

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

United Federal Credit Union  
 808 East Front Street  
 Buchanan, MI 49107

SSN/TIN:

Telephone #: 1-616-695-0116

G. ASSIGNEE NAME AND ADDRESS (if any)

SSN/TIN:

Telephone #:

H. Check If Covered:

PROCEEDS  
 PRODUCTS

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

1- 2000 20 ft smoker Craft Boat #smk05071c000  
 1- 2000 Yamaha 70 hsp Motor # 683L494355J  
 1- 2000 Moonshine Trailer # 4RPBT2012YC011986

J. COLLATERAL CATEGORIES:  
 (Instructions on Back of Form)

K. Debtor Signature Brad Arneson

Tammy 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. (3)  Collateral acquired after a change of name, identity or corporate structure of debtor; or  
 when:  Debtor moved to ND  Collateral brought into ND; (4)  Collateral as to which the filing has lapsed.  
 (2)  Proceeds of the described original collateral already perfected; Original File # \_\_\_\_\_

L. United Federal Credit Union By: \_\_\_\_\_

Signature of Secured Party

**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 FARM PRODUCT DESCRIPTION CROP YEAR QUANTITY (if applicable) COUNTY FARM PRODUCT DESCRIPTION CROP YEAR QUANTITY (if applicable)

CODE CODE (if applicable) (if applicable) CODE CODE (if applicable) (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

2010-10548

03/31/2000-10548  
 12:02 PM CERTIFIED

SHELBY COUNTY JUDGE OF PROBATE  
 100 NMS  
 15.00