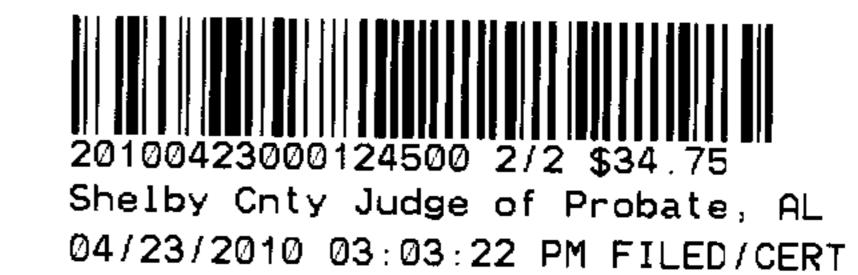


THE ABOVE	SPACE IS FO	R FILING OFFICE USI	EONLY
r 1b) - do not abbreviate or combine names			
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	FIRST NAME MONROE CITY	FIRST NAME MONROE CITY STATE	FIRST NAME MONROE CITY STATE POSTAL CODE

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LE		BAILEE/BAILOR SELLER/BUYER	AG. LIEN NON-U	JCC FILING
This FINANCING STATEMENT is to be filed [for record] (or ESTATE RECORDS. Attach Addendum	recorded) in the REAL 7. Check to REQUES [if applicable] [ADDITIONAL FEE	ST SEARCH REPORT(S) on Debtor(s) [optional]	All Debtors Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA	100110			
01021256 SHELBY COUNTY A	L 31-15			



UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT 9a, ORGANIZATION'S NAME MIDDLE NAME, SUFFIX FIRST NAME 9b. INDIVIDUAL'S LAST NAME MONROE **JENKINS** 10. MISCELLANEOUS: THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME SUFFIX MIDDLE NAME FIRST NAME 11b. INDIVIDUAL'S LAST NAME LINDA **JENKINS** COUNTRY POSTAL CODE STATE CITY 11c. MAILING ADDRESS 35124 ALPELHAM 298 CREEKSIDE LN 11g. ORGANIZATIONAL ID #, if any 11e. TYPE OF ORGANIZATION 11f, JURISDICTION OF ORGANIZATION ADD'L INFO RE 11d, TAX ID #: SSN OR EIN ORGANIZATION NOT REQUIRED IN WISCONSIN NONE DEBTOR ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) ADDITIONAL SECURED PARTY'S or 12a. ORGANIZATION'S NAME MIDDLE NAME FIRST NAME SUFFIX 12b. INDIVIDUAL'S LAST NAME COUNTRY STATE POSTAL CODE CITY 12c. MAILING ADDRESS 16. Additional collateral description: 13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing. 14. Description of real estate: LEGAL DESCRIPTION: 237 SECTION 26 TWP 20S LOT RANGE 03W HOLLAND LAKES SECTION SHELBY COUNTY AL 15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest): 17. Check only if applicable and check only one box. Trustee acting with respect to property held in trust_or___Decedent's Estate 18. Check only if applicable and check only one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction — effective 30 years Filed in connection with a Public-Finance Transaction — effective 30 years

FILING OFFICE COPY --- NATIONAL UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 07/29/98)

^{*} An Individual's social security number is not required to be placed on the form in Wisconsin (See Instructions)