



FARM PRODUCTS FILING - UCC-1F

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
B. SEND ACKNOWLEDGMENT TO: (Name and Address)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME				
OR				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any
				<input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any
				<input type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME				
OR				
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE

4a. Item No.	4b. Product Code	4c. County Produced Code	4d. Crop Year(s), if less than All	4e. Amount, if necessary	4f. Unit
1.					
2.					
3.					
4.					
5.					

Additional information (not to exceed 150 characters and spaces):

Debtor Signature(s):

Secured Party Signature:

Filing Office Copy



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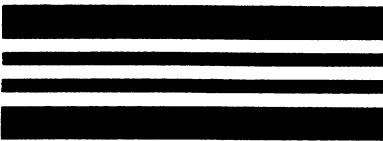
- 1.
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Secured Party Signature:

Acknowledgment Copy



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Additional information (not to exceed 150 characters and spaces):

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Secured Party Signature:

Debtor Copy



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Additional information (not to exceed 150 characters and spaces):

Debtor Signature(s):

Secured Party Signature:

Secured Party Copy

Instructions for Farm Products Filing (UCC-1F)

Please type or laser-print this form. Be sure it is completely legible. Read all instruction, especially instruction 1: correct Debtor name is crucial. Follow instruction completely.

Fill in form very carefully; mistakes may have important legal consequences. If you have questions consult your attorney. Filing office cannot give legal advice.

Do not insert anything in the open space in the upper portion of this form; it is reserved for filing office use.

When properly completed, send Filing Office Copy with required fee to filing office.

If you need to use attachments use UCC-2F or plain sheets of 8-1/2 X 11 inch paper and put the name of the first Debtor at the top of each attached sheet.

- A. To assist filing office personnel who may wish to communicate with filer, filer may provide information in item A. This item is optional.
- B. Complete item B if you want an acknowledgement copy sent to you. The copy will be returned in a window envelope to the address shown in item B. You may send the Acknowledgement Copy of this form with your filing or one dollar (\$1.00) to receive a computer generated copy.

1. **Debtor name:** Enter only one Debtor name in item 1, an organization's name (1a) or an individual's name (1b). Enter Debtor's exact full legal name. Don't abbreviate.

1a. **Organization Debtor:** "Organization" means an entity having a legal identity separate from its owner. A partnership is an organization; a sole proprietorship is not an organization, even if it does business under a trade name. If Debtor is a partnership, enter exact full legal name of partnership; you need not enter names of partners as additional Debtors. If Debtor is a registered organization (e.g. corporation, limited partnership, Limited liability company), it is advisable to examine Debtor's current filed Charter documents to determine Debtor's correct name, organization Type, and jurisdiction of organization.

1b. **Individual Debtor:** "Individual" means a natural person; this includes a sole proprietorship, whether or not operating under a trade name. Don't use prefixes (Mr., Mrs., Ms). Use suffix box only for titles of lineage (Jr., Sr., III) and not for other suffixes or titles (e.g., M.D.). Use married woman's personal name (Mary Smith, not Mrs. John Smith). Enter individual Debtor's family name (surname) in Last Name Box, first given name in First Name Box, and all additional given names in Middle Name box.

For both Organization and Individual Debtors: Do not use Debtor's trade name, DBA, AKA, FKA, Division name, etc. in place of or combined with Debtor's legal name; you may wish to add such other names as additional Debtors, but this is neither required nor recommended.

1c. **Address:** A complete mailing address for the Debtor is required.

1d. **Tax ID #:** Debtor's taxpayer identification number – social security number or federal employer identification number – is required.

1e,f,g. **Additional Information Re Organization Debtor** is always required. Type of organization and jurisdiction of organization can be determined from Debtor's current filed charter document. Organizational ID#, if any, is assigned by the agency where the charter document was filed; this is different from the tax ID#; this should be entered preceded by the 2-character US Postal identification of state of organization if one of the United States (e.g., CA12345, for a California corporation whose organizational ID# is 12345); if agency does not assign organizational ID#, check box in item 1g indicating "None."

2. If an additional Debtor is included, complete item 2, determined and formatted per instruction 1. To include additional Debtors attach a UCC-2F form with the additional information.

3. **Secured Party:** Enter information for Secured Party or Total Assignee, determined and formatted per instruction 1. If there is an additional Secured Party attach a UCC-2F form with the information formatted as in item 3.

If there has been a total assignment of the Secured Party's interest prior to filing this form, you may either (1) enter Assignor's name and address in item 3 and file an Amendment (UCC-3F); or (2) enter Assignee's name and address in item 3 and, if you wish, attach an Addendum (UCC-2F) giving Assignor's name and address and checking Assignor box.

4b. The three-digit Product Code of each farm product covered by this financing statement must be entered in the column. A listing of product codes is available at www.sos.state.al.us.

4c. The two-digit County Code for each county in which the particular farm product is produced or is to be produced must be entered in the column. A listing is available at www.sos.state.al.us. If all counties in Alabama are involved use code 99.

4d. **Crop Year:** No entry is required if all crop years of the farm product are covered by this financing statement. If fewer than all crop years are covered, the last two digits of each covered crop year should be entered.

4e,f. **Amount and Unit:** No entry should be made unless less than all the farm product is covered by this financing statement. If an amount of farm product covered by this financing statement can be determined by use of county or crop year entries from an amount which is not, an "X" should be entered in the column and the additional information should be listed in the section for additional information below the columns.

If additional space is needed to enter more than 5 farm Products, use and Addendum (UCC-2F).

Debtor's Signature(s): Each individual debtor must sign. Corporate debtor must be signed by corporate officer. A Partnership debtor must be signed by a general partner.

Secured Party Signature: The Secured Party must sign.