

# 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    |            |                     |
| OR                         |            |                     |
| 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX |

## 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    |            |                                   |                           |  |
| OR                          |            |                                   |                           |  |
| 11b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME                       | SUFFIX                    |  |
| 11c. MAILING ADDRESS        | CITY       | STATE                             | POSTAL CODE               | COUNTRY  |
| 11d. TAX ID #:              | SSN OR EIN | ADD'L INFO RE ORGANIZATION DEBTOR | 11e. TYPE OF ORGANIZATION | 11f. JURISDICTION OF ORGANIZATION                              |
|                             |            |                                   |                           | 11g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE |

## 12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

|                             |            |             |             |         |
|-----------------------------|------------|-------------|-------------|---------|
| 12a. ORGANIZATION'S NAME    |            |             |             |         |
| OR                          |            |             |             |         |
| 12b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX      |         |
| 12c. MAILING ADDRESS        | CITY       | STATE       | POSTAL CODE | COUNTRY |

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:

16. Additional collateral description:

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.

Debtor is a  Trust or  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