



UCC FARM PRODUCTS FINANCING STATEMENT ADDENDUM

(If there is insufficient space on a UCC-1F for all necessary information, enter the excess on this form and attach it to the UCC-1F.)

Enter the first debtor listed on the associated UCC-1F form **exactly** as it appears on that form.

1. Debtor	Organization's Name						
	OR	Individual's Last Name	First Name	Middle Name	Suffix		
Address		City	State	Zip	SSN/TIN [last 4 digits only]		

1. Debtor	Organization's Name						
	OR	Individual's Last Name	First Name	Middle Name	Suffix		
Address		City	State	Zip	SSN/TIN [last 4 digits only]		

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	OR	Individual's Last Name	First Name	Middle Name	Suffix		
Address		City	State	Zip	SSN/TIN [last 4 digits only]		

Additional Secured Party Name and Address

OR	Organization's Name						
	Individual's Last Name	First Name	Middle Name	Suffix			
Address		City	State	Zip			

Enter additional farm products

Item No.	Product Code	Product Name (optional)	County Code(s)	Crop Year(s), if less than all	Amount, if necessary	Unit	Add. Info
5							
6							
7							
8							
9							
10							

If distinguishing additional information is required, enter item number of product and information

Item No.	Additional information (not to exceed 150 characters and spaces per item).

Debtor(s) Signature(s) - This item is optional if signed agreement exists granting a lien on the farm product(s).

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