

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)  
**TONI LOOMIS (219)942-1175**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**MAINSOURCE BANK - HOBART  
 555 EAST THIRD STREET  
 P. O. BOX 487  
 HOBART, IN 46342-0487**

2007 000793

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2007 APR 24 AM 9:49

MICHAEL A. BROWN  
RECORDER

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	
	TIPTON		SAMUEL	E.		
1c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
4433 E. 83RD AVENUE			MERRILLVILLE	IN	46410	
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	
	TIPTON		SUSAN	A.		
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
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	
	MAINSOURCE BANK - HOBART					
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
555 EAST THIRD STREET			HOBART	IN	46342-0487	

4. This FINANCING STATEMENT covers the following collateral:

ALL OF THE PERSONAL PROPERTY AND FIXTURES LOCATED ON THE PROPERTY, THE LEGAL DESCRIPTION OF WHICH IS ATTACHED HERETO, MADE A PART HEREOF, INCLUDING ACCESSIONS, ACCESSORIES AND REPLACEMENTS, AND PROCEEDS THEREOF, INCLUDING TORT AND INSURANCE CLAIMS.

5. ALTERNATIVE DESIGNATION (if applicable):  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  A.G. LIEN  NON-UCC FILING

6.  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional)  All Debtors  Debtor 1  Debtor 2 [ADDITIONAL FEE]

8. OPTIONAL FILER REFERENCE DATA

14-1956978