

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)  
LOAN SERVICING 800-755-8015 **2007 000318**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)  
FIRST MUTUAL BANK  
PO BOX 1647  
BELLEVUE, WA 98009-1647  
*see attachment*

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2007 MAY -4 AM 10: 24

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 BAILEY		FIRST NAME DALEASE	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 1121 LYONS ST E		CITY HAMMOND	STATE IN	POSTAL CODE 46320
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 FIRST MUTUAL BANK				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS PO BOX 1647		CITY BELLEVUE	STATE WA	POSTAL CODE 98009-1647

*Brody-Tal-Sum 5-3-07*

4. This FINANCING STATEMENT covers the following collateral:

CABINETS  
PARCEL ID: 26-35-0060-0017

LEGAL: LOT 17, BLOCK 8, MAYWOOD ADDITION, CITY OF HAMMOND, LAKE COUNTY, INDIANA

SITUATE IN THE COUNTY OF LAKE, STATE OF INDIANA

ADDRESS: 1121 LYONS ST, HAMMOND, IN 46320

FIXTURE FILING

5. ALTERNATIVE DESIGNATION (if applicable)	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. <input checked="" type="checkbox"/> 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

8. OPTIONAL FILER REFERENCE DATA  
BAILEY, D, 52-108316-08

*\$9 Lake, IN*

**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			2007 000318		
OR					
9b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME, SUFFIX	
BAILEY		DALEASE			

10. MISCELLANEOUS:

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LAKE COUNTY  
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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.  
 CABINETS  
 PARCEL ID: 26-35-0060-0017  
 LEGAL: LOT 17, BLOCK 8, MAYWOOD ADDITION, CITY OF HAMMOND, LAKE COUNTY, INDIANA  
 SITUATE IN THE COUNTY OF LAKE, STATE OF INDIANA  
 ADDRESS: 1121 LYONS ST, HAMMOND, IN 46320

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

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