

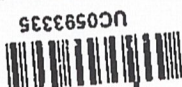
# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
MISTY PEARCY 217-345-2164

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

PERSONAL FINANCE COMPANY  
10 LINCOLN AVE  
CHARLESTON, IL 61920



UC05933335

FACE IS FOR FILING OFFICE USE ONLY

RECEIVED  
SECRETARY OF STATE  
UNIFORM COMM. CODE DIV.

2011 JUN 24 PM 4: 30

UCU106/24/11:03:4101

20.00 CK01

SOSIL 11:30 16383945 FS

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		1b. INDIVIDUAL'S LAST NAME		1c. MAILING ADDRESS		1d. SEE INSTRUCTIONS		1e. INFO RE		1f. TYPE OF ORGANIZATION		1g. JURISDICTION OF ORGANIZATION		1h. ORGANIZATIONAL ID #, if any	
SMITH		SMITH		220 N 7TH STREET		ADDL. INFO RE		DEBTOR ORGANIZATION		CHARLESTON		IL		61920	
FIRST NAME		MIDDLE NAME		CITY		STATE		POSTAL CODE		COUNTRY		SUFFIX			

2a. ORGANIZATION'S NAME		2b. INDIVIDUAL'S LAST NAME		2c. MAILING ADDRESS		2d. SEE INSTRUCTIONS		2e. INFO RE		2f. TYPE OF ORGANIZATION		2g. JURISDICTION OF ORGANIZATION		2h. ORGANIZATIONAL ID #, if any	
LYNETTA		SMITH		220 N 7TH STREET		ADDL. INFO RE		DEBTOR ORGANIZATION		CHARLESTON		IL		61920	
FIRST NAME		MIDDLE NAME		CITY		STATE		POSTAL CODE		COUNTRY		SUFFIX			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE or ASSIGNOR S/P) - insert only one secured party name (3a or 3b)		3c. MAILING ADDRESS		3d. SEE INSTRUCTIONS		3e. INFO RE		3f. TYPE OF ORGANIZATION		3g. JURISDICTION OF ORGANIZATION		3h. ORGANIZATIONAL ID #, if any	
PERSONAL FINANCE COMPANY		10 LINCOLN AVE		ADDL. INFO RE		DEBTOR ORGANIZATION		CHARLESTON		IL		61920	
FIRST NAME		MIDDLE NAME		CITY		STATE		POSTAL CODE		COUNTRY		SUFFIX	

4. THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL:

ELIPTICAL EXERCISE EQUIPMENT  
46" SANYO HD TV  
32" VIZIO FLAT SCREEN TV  
WII GAME SYSTEM WITH 4 CONTROLLERS AND GAMES  
HEWLETT PACKARD DESKTOP COMPUTER  
HEWLETT PACKARD LAPTOP COMPUTER  
SANYO VIDEO RECORDER  
STORY AND CLARK ANTIQUE PIANO

5. ALTERNATIVE DESIGNATION (if applicable):		6. THE FINANCING STATEMENT IS TO BE FILED (or recorded) in the REAL ESTATE RECORDS. Attach Addendum		7. CHECK TO REQUEST SEARCH REPORT(S) on Debtor(s)		8. OPTIONAL FILER REFERENCE DATA	
LESSOR/LESSOR		AG. LIEN		SELLER/BUYER		226849-01	
CONSIGNEE/CONSIGNOR		NON-UCC FILING		Debtor 1			
BAILEE/BAILOB				Debtor 2			



# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

MISTY PEARCY 217-345-2164

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

PERSONAL FINANCE COMPANY

10 LINCOLN AVE

CHARLESTON, IL 61920

1a. INITIAL FINANCING STATEMENT FILE #

16383945 FS

6-24-11

1b. This FINANCING STATEMENT AMENDMENT is

to be filed (for record) (or recorded) in the

REAL ESTATE RECORDS.

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement

3. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 6.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects ☐ Debtor ☐ Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

☐ CHANGE name and/or address: Please refer to the detailed instructions regarding to changing the name/address of a party.

☐ DELETE name: Give record name to be deleted in item 6a or 6b.

☐ ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME

OR 6b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

7d. SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION

DEBTOR

7e. TYPE OF ORGANIZATION

7f. JURISDICTION OF ORGANIZATION

7g. ORGANIZATIONAL ID #, if any

☐ NONE

8. AMENDMENT (COLLATERAL CHANGE): check only one box.  
Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned.

TERMINATED

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☒ and enter name of DEBTOR authorizing this Amendment

9a. ORGANIZATION'S NAME

OR 9b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

10. OPTIONAL FILER REFERENCE DATA

PD OFF 5/29/2012

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2012 JUN 18 PM 4: 30

UCU106/18/12:03:6792:

0.00 CK00

SOSIL 12:14 1813388 TM



# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

MISTY PEARCY 217-345-2164

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

PERSONAL FINANCE COMPANY  
10 LINCOLN AVE  
CHARLESTON, IL 61920

RECEIVED  
SECRETARY OF STATE  
UNIFORM COMM. CODE DIV.

2012 JUN 20 PM 4: 30

UCU106/20/12:02:7294:

0.00 CXX00

SOSIL 11:34 1813720 TM

1a. INITIAL FINANCING STATEMENT FILE #

16383945 FS

6-24-11

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS.

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects ☐ Debtor ☐ Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

☐ CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.

☐ DELETE name: Give record name to be deleted in item 6a or 6b.

6. CURRENT RECORD INFORMATION: ☐ ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6a. ORGANIZATION'S NAME

6b. INDIVIDUAL'S LAST NAME

SMITH

ROBERT

C

SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME

7b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

7d. SEE INSTRUCTIONS

7e. TYPE OF ORGANIZATION

DEBTOR ORGANIZATION

7f. JURISDICTION OF ORGANIZATION

7g. ORGANIZATIONAL ID #, if any

NONE

8. AMENDMENT (COLLATERAL CHANGE): check only one box.

Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned.

TERMINATED

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment; if this is an Amendment authorizing this Amendment adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☒ and enter name of DEBTOR authorizing this Amendment)

9a. ORGANIZATION'S NAME

PERSONAL FINANCE COMPANY

9b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

10. OPTIONAL FILER REFERENCE DATA

PD 5/29/2012