ACCOUNT INFORMATION

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DOROTHY L GALE P.O. BOX 3141 AUSTIN, TX 78757

հոհվհիսահեհեհոհիստ**,**

Summary As Of:

Account Number: 1212-3434-5 5 Balance: 7 Maturity Payments Made:

Last Payment Made: 02/24/2010 Last Paymer

Account Status as of: 03/01/2010

Payments Due:

03/22/2010

\$416.24 Fees:

Amount Due:

Activity Since Your Last Statemen

Haddala

02/24/2010

Payment Made

RMATION

M cards. Y urring online

redit card or pinless ca call. You will also need rumber.

ment. Bring your payment you. Call toll-free

ount number:

Quick Collect to make your payment. Bring and the fee in cash to an agent near you, or use illect by Phone service and pay with a VISA or rd issued debit or credit card. Call toll-free

for the agent location nearest you. You will need the following information:

Code City: State Code: Your account number:

Payment Information

For prompt and accurate processing of your payment, please write your account number on your check and return it with the lower portion of this statement in the envelope provided.

Pay to: ACME FINANCIAL CORPORATION Five thousand one and 99/100s dollars

If you are taking advantage of our automatic payment plan or have an address change, please check the box and fill out the reverse side.

If you do not want your check converted to an electronic debit, please

DOROTHY L GALE

ACME FINANCIAL CORPORATION 1234 APPLE LANE AUGUSTA, GEORGIA 98343 ابتلا بالسلاسالسالسالسالساليال Payment Due Date: Account Number:

TOTAL DUE:

Additional Payment: Total Amount Enclosed:

If you are Please make all checks payable to sending in additional money to reduce your balance, please indicate below. 03/22/2010

1212-3434-5656-7878

May 24, 2010

\$ 5001.99

\$416.24

23553634 63636 3636364 authorized representative

This is the back of the Money Order coupon/voucher/remittance

\$.0007.2010.01.01.1.E0.Z.ACSEUC_100301003-002_001_EDPSIM9-STM_0

The Front of the 1040V looks like this

			ach Here and Mail With Your Paym							
	E 1040-V Department of the Treasury Internal Revenue Service (99)	▶ Do n	Payment Vouc		payment or ret	20	009			
	1 Your social security number 123-12-123	r (SSN)	If a joint return, SSN shown second on your return	pa	nount you are ying by check money order	LEAVE E	Cents BLANK			
e	4 Your first name and initial			7	Last name					
type	DOROTHY	L			GALE					
Print or	If a joint return, spouse's first name and initial Last name									
4	Home address (number an		Apt. no.							
	P.O. BOX 3141									
	City, town or post office, state, and ZIP code (If a foreign address, enter city, province or state, postal code, and country.)									
	TORNADO ALLEY, KANSAS 77057									

The Back of the 1040V looks like this

ACETIRATE PREPAID COMMON STOCK THE BRIDGE TO TEROSURY

ACETIRATE FROM LEW AND RELEASED THE BRIDGE THE PREPAID TREASURY 1.234

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AND THE PREPAID COMMON ADJUST THE BRIDGE THEY INTO THE PREPAID CHARGE THEY INTO



UCC Filing Acknowledgement

03/29/2011

Page 1 of 1

\$5.00

ÖQTQVJ ['N'I CNG H363'VQTPCFQ'NCPG SAN PEDRO CA 90731

Filing Fee:

Total Fee: \$5.00

The California Secretary of State's Office has received and filed your document. The information below reflects the data that was indexed in our system. Please review the information for accuracy. Included is an image of the filed document to assist you in your review. If you find a potential error, please notify the UCC Section at the number listed below at your earliest convenience.

Filing Type: Financing Statement File Date: 03/29/2011 File Time: 09:59

Filing Number: 11-%/&'), % &% Lapse Date: 03/29/2016

Debtor(s):

ORGANIZATION 8 CFCH< MT @; 5 @9

' % %HCFB58C' @ B9' SAN PEDRO CA USA 90731

Secured Party(ies):

INDIVIDUAL ; 5 @9 \(\bar{z}8CFCH< M\(\bar{z}\) @CI =G9

C/O'% %HCFB58C' \$\omega\$ B9, SAN PEDRO, CALIFORNIA

Filing by the Secretary of State is not conclusive proof that all conditions for securing priority have been met. Ensuring that accurate information is on the document to be filed is the responsibility of the filing party. If this filing is challenged, the Secretary of State does not guarantee that the filing is legally sufficient to secure priority under UCC Article 9 and expressly disclaims any liability for failure of the filing party to secure priority resulting from the information contained in the filed document, or the lack of information on the filed document.

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]										
[[[-[[]-[]]]										
		_								
B. SEND ACKNOWLEDGMENT TO: (Name and Address) ÖUÜUVPŸÆÃÕŒŠÒ		DOG	DOCUMENT NUMBER: HFI FÍ JÎ (HÍ Ì							
HFI FÁ∕UÜÞŒÖUÆSŒÞÒ		FILI	NG NUMBER	: 11-FFG H	ì FHGF					
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SAN PEDRO, CA 90731 USA		IMA THE	GE GENERA BOVE SPA	TED ELEC CE IS FOR	TRONICALLY I	FOR \ FFICE	VEB FILING USE ONLY			
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor	name (1a or 1b) - de	not ab	breviate or co	ombine na	mes		002 01121			
1a. ORGANIZATION'S NAME	· ·									
OR FQTQVI ['N'I CNG				•						
1b. INDIVIDUAL'S LAST NAME	FIRST NAME			MIDDLE NAME			SUFFIX			
1c. MAILING ADDRESS	CITY			STATE	POSTAL COD	E	COUNTRY			
5363''VQTPCFQ''NCPG	SAN PEDRO			CA	90731		USA			
1d. <u>SEE</u> ADD'L DEBTOR INFO	1e. TYPE OF		RISDICTION	1a ORGA	NIZATIONAL I	D# if	anv			
INSTRUCTIONS	ORGANIZATION		GANIZATION	ig. Onar	MILATIONAL	υ π,	□NONE			
	LEGAL ENTITY	USA		FG -IÏ- GÏ	FGH		LINONE			
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert on	lv one debtor name	(2a or 2	2b) - do not al			nes				
2a. ORGANIZATION'S NAME	<u> </u>	•								
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME			MIDDLE	14845		CUETIV			
20. INDIVIDUAL S LAST NAME	FIRST NAME	NAME			NAME		SUFFIX			
2c. MAILING ADDRESS	CITY				POSTAL COD	E	COUNTRY			
2d. SEE ADD'L DEBTOR INFO	2e. TYPE OF	lof JULE	RISDICTION				<u> </u>			
	ORGANIZATION	OF OR	GANIZATION	2g. ORGA	NIZATIONAL I	D#, if	_			
				<u> </u>			□NONE			
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of A	SSIGNOR S/P) - ins	ert only	one secured	party nam	e (3a or 3b)					
3a. ORGANIZATION'S NAME										
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NA	MF		SUFF	ΊΧ			
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3c. MAILING ADDRESS	CITY		STATE	POSTAL	CODE	cou	NTRY			
c/o 5363"Vqtpcf q"Ncpg, San Pedro, California						ZZZ				
4. This FINANCING STATEMENT covers the following collateral:										
PRIVATE REGISTERED SETOFF BOND Number F1 3456	789									
Value of Collateral: One-million and 00/100 Dollars USD S	\$1,000,000.00									
5. ALT DESIGNATION: ☐LESSEE/LESSOR ☐CONSIGNEE/CONS							FILING			
6. This FINANCING STATEMENT is to be filed [for record] (or					S) on Debtor(s)					
recorded) in the REAL ESTATE RECORDS Attach Addendum [if applicable]	[ADDITION	AL FEE	[optional]	∟All Del	otors 🗆 Debtoi	r 1 📙	Debtor 2			
8. OPTIONAL FILER REFERENCE DATA										
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FILING OFFICE COPY

UCC FINANCING STATEMENT ADDENDUM

		UCTIONS (front a								
			or 1b) ON RELATED FINANCING	STATEMENT						
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	FQTQVJ [
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OR										
```	11b. INDIVID	UAL'S LAST NAM	IE	FIRST NAME			MIDDLE N	NAME		SUFFIX
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		ADD'L DEBTOR	NFO	11e. TYPE OF	11f. JUF	RISDICTION	11g. ORG	ANIZATIONAL	ID#, if	any
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OR	12a. ORGAN	UAL'S LAST NAME			<u>e</u> name (		ME POSTAL	CODE	SUFF	
OR 12c	12a. ORGAN 12b. INDIVID . MAILING AI	UAL'S LAST NAME	1E	FIRST NAME	e name (	MIDDLE NA		CODE		
OR 12c	12a. ORGAN 12b. INDIVID . MAILING AI	UAL'S LAST NAME		FIRST NAME		MIDDLE NA STATE		CODE		
OR- 12c 13.	12a. ORGAN 12b. INDIVID . MAILING AI This FINANC	UAL'S LAST NAME	T covers □timber to be cut or □	FIRST NAME		MIDDLE NA STATE		CODE		
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### **UCC Amendment Acknowledgement**

03/29/2011

Page 1 of 1

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Filing Fee: \$5.00

Total Fee: \$5.00

The California Secretary of State's Office has received and filed your document. The information stated below reflects the data that was indexed in our system. Please review the information for accuracy. Included is an image of the filed document to assist you in your review. If you find a potential error, please notify the UCC Section at the number listed below at your earliest convenience.

Amendment Type: **Assignment** File Date: **03/29/2011** File Time: **10:02** 

Amendment Filing #: 11-

Original Filing Number: 11- Lapse Date: 03/29/2016

Secured Party(ies):

INDIVIDUAL GEITHNER, TIMOTHY, F,

1500 PENNSYLVANIA AVENUE, N.W. WASHINGTON DC

**USA 20220** 

ORGANIZATION UNITED STATES TREASURY

1500 PENNSYLVANIA AVENUE, N.W. WASHINGTON DC

USA 20220

Filing by the Secretary of State is not conclusive proof that all conditions for securing priority have been met. Ensuring that accurate information is on the document to be filed is the responsibility of the filing party. If this filing is challenged, the Secretary of State does not guarantee that the filing is legally sufficient to secure priority under UCC ARTICLE 9 and expressly disclaims any liability for failure of the filing party to secure priority resulting from the information contained in the filed document, or the lack of information on the filed document.

# **UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]		7							
B. SEND ACKNOWLEDGMENT TO: (Name and Address) ÖUÜUVPŸÆÆÖŒŠÒ		DOCUMENT NUM	//BER:						
HFI FÁ/UÜÞŒÜUÆŒÞÒ		FILING NUMBER		10.02					
SAN PEDRO, CA 90731 USA		FILING DATE: 03/29/2011 10:02 IMAGE GENERATED ELECTRONICALLY FOR WEB FILING THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY							
1a. INITIAL FINANCING STATEMENT FILE # 11-33457: 3543				EMENT AMENDMEN I) in the REAL ESTA					
<ol> <li>TERMINATION: Effectiveness of the Financing Statement identifi authorizing this Termination.</li> </ol>	ied above is terminat	ed with respect to secu	urity intere	st(s) of the Secured P	arty arty				
3. CONTINUATION: Effectiveness of the Financing Statement ident Continuation Statement is continued for the additional period provided	tified above with resp	ect to security interest	(s) of the	Secured Party authoria	zing this				
4. ✓ ASSIGNMENT (full or partial): Give name of assignee in item 7a		of assignee in item 7c:	and also	give name of assignor	in item 9.				
5. AMENDMENT (PARTY INFORMATION): This Amendment affects					iii itoiii o.				
Also check one of the following three boxes and provide appropriate inf  CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.  6. CURRENT RECORD INFORMATION:  6a. ORGANIZATION'S NAME	DELETE nam	and/or 7. ne: Give record name t item 6a or 6b.		D name: Complete itel also item 7c	m 7a or 7b,				
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX				
7. CHANGED (NEW) OR ADDED INFORMATION:	ļ				ı				
7a. ORGANIZATION'S NAME									
OR UNITED STATES TREASURY 75. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX				
75. INDIVIDUAL S EAST NAME	INOTHAME		MIDDEL	NAME	Johns				
	CITY		STATE	POSTAL CODE	COUNTRY				
,	WASHINGTON	Tr. IUDIODIOTION	DC	20220-	USA				
	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORG	ANIZATIONAL ID#, if	any NONE				
8. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated or	collateral description	or describe collateral	<b>✓</b> accione	ad.					
besome conateral and elected of an added, of give entire an estated to	conateral description,	or describe conateral	i assign	5 <b>u</b> .					
PRIVATE REGISTERED SETOFF BOND Number F1 34567	789								
Value of Collateral: One-million and 00/100 Dollars USD \$									
	, ,								
9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AN									
authorized by Debtor which adds collateral or adds the authorizing Deb DEBTOR authorizing this amendment.	otor, or if this is a Terr	mination authorized by	a Debtor	, check here Land er	nter name of				
a. ORGANIZATION'S NAME									
OR b. INDIVIDUAL'S LAST NAME	FIRST NA Fatayi {	AME MIDE	OLE NAM	E SUFFIX					
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10. OPTIONAL FILER REFERENCE DATA									

# **UCC FINANCING STATEMENT AMENDMENT ADDITIONAL PARTY**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

	<b>INITIAL FINANCI</b> -33457: 3543	NG STATEME	NT FILE # (same as i	tem 1a on Ame	endment form)						
13. form		Y AUTHORIZIN	IG THIS AMENDMEN	<b>IT</b> (same as ite	m 9 on Amendmer	nt					
_	13a. ORGANIZA	TION'S NAME									
OR	13b. INDIVIDUAL	'S LAST	FIRST NAME	Іміс	DDLE NAME, SUF	FIX					
	NAME		Fqtqyj {'"""		Ngwkug						
	I cmg MISCELLANEOUS										
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14.	ADDITIONAL DE	BTOR'S EXAC	T FULL LEGAL NAM	/IE - insert onl	y <u>one</u> debtor nan						
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OR	15b. INDIVIDUAL	'S LAST NAM	E	FI	RST NAME			MIDDLE I	NAME		SUFFIX
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OR	16b. INDIVIDUAL	'S LAST NAM	E	FI	RST NAME			MIDDLE N	NAME		SUFFIX
16c	. MAILING ADDR	ESS		С	ITY			STATE	POSTAL COD	E	COUNTRY
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17./	ADDITIONAL SEC	CURED PARTY	''S NAME (or Name o	of TOTAL ASSI	GNEE) - insert or	ıly <u>o</u>	ne name (17a or	17b)			
- 1	17a. ORGANIZAT										
	<b>176. INDIVIDUAL</b> GEITHNER		E		FIRST NAME TIMOTHY		MIDDLE NA F			SUFF	
	. <b>MAILING ADDR</b> 00 PENNSYLV		HE NW		CITY WASHINGTO	N	STATE DC	POSTAL 20220-	CODE	COUN USA	ITRY
			'S NAME (or Name of	of TOTAL ASSI			-			CDA	
	18a. ORGANIZAT	TION'S NAME	,		, 5511 61	,					
UK	18b. INDIVIDUAL	'S LAST NAM	E		FIRST NAME		MIDDLE NA	ME		SUFF	IX
18c	. MAILING ADDR	ESS			CITY		STATE	POSTAL	CODE	COUN	ITRY

## PRIVATE REGISTERED SETOFF BOND

BOND NUMBER DG3456789 **\$1,000,000.00** 

REGISTERED

CALIFORNIA SECRETARY OF STATE UCC DOCUMENT NO.: 28999999999 UCC FILING NO.: 11-1123581321

Pay to the Order of: UNITED STATES TREASURY ("PAYEE")

1500 Pennsylvania Avenue N.W.

Washington, D.C. 20220

Issue Date: <u>March 31, 2011</u>

Maturity Date: March 31, 2041

For Further Credit to: Taxpayer/Account: DOROTHY L GALE 123-12-1234

By/On/Through: Dorothy Louise Gale, Principal ("Creditor")

Private Offset Account No.  $\underline{123121234}$ 

KNOW ALL MEN BY THESE PRESENTS, which are intended to constitute a *Private Registered Setoff Bond*; and WHEREAS, only fiat money exists in circulation for the discharge of debt:

NOW, THEREFORE, the undersigned Creditor being of sound mind and honorable intentions, for the purposes of protecting secured interests, reserving rights of recourse, remedy and subrogation, and maintaining the honor of the above-named Account Holders and Accounts, does by necessity hereby issue this *Private Registered Setoff Bond*, tendered, in good faith, as full satisfaction of any and all claims and/or demands, to wit: In the Creditor's rightful *Sui Juris* status, the Creditor does hereby knowingly and with full disclosure hold, bind and obligate Creditor's collateral jointly and severally by this instrument as voluntary surety for all of the above-noted Account Holders and Accounts, each severally, for any amount up to and including: One million United States Dollars, i.e., \$1,000,000.00, insuring, underwriting, indemnifying and discharging the said Account Holders and Accounts against any and all pre-existing, current and future losses, costs, debts, taxes, encumbrances, deficiencies, liens, judgments, true bills, obligations of contract or performance, defaults, charges, and any and all other obligations as may exist or come to exist during the term of this bond (jointly and severally "Liabilities"), thereby honorably discharging and vacating dollar-for-dollar all such obligations until the sum or the term of this bond is exhausted. The PAYEE shall have ten (10) days from presentment to dishonor this bond by returning it to the Principal by registered mail to Frank L Baum, Notary Public, 8642 Writer Street, Chitenango, NY 73737. Failure to return this bond will stipulate acceptance and honor.

SATISFACTION OF LIABILITIES. The PAYEE may demand payment of all or any portion hereof at its discretion by posting the payment to the Private Offset Account above-indicated dollar-for-dollar and transferring the obligation by TT&L or presentment to:

Timothy F. Geithner ("Secretary") Secretary of the Treasury U.S. Department of the Treasury 1500 Pennsylvania Avenue, N.W. Washington, D.C. 20220

PRIVATE OFFSET ACCOUNT. The PAYEE shall by the end of business on the day of presentment and in any case no later than one business day thereafter post the full or partial value of this bond to satisfy, set-off, pay, terminate, and discharge dollar-for-dollar in accord with generally accepted accounting principles any and all past, present, and/or future debts, liabilities, encumbrances, deficiencies, deficits, liens, charges, fees, interest, bills, true bills, taxes, obligations of contract and/or performance, instruments of debt, and all other obligations (jointly and severally "Liabilities") attributed to the Account Holders and Accounts above-noted.

AMOUNT DUE:	PAYEE enter the amount due below										
	\$								•		

MATURITY. Upon demand, the Secretary shall release the obligation dollar-for-dollar to the extent so paid, with the balance of the bond remaining in full force and effect. Upon satisfaction of this obligation in full, the Secretary shall mark this bond cancelled and return it bearing the marks of cancellation to the Principal or the Principal's heirs by registered mail, all profits and proceeds accruing since presentment to remain with the Secretary for the benefit and use of the United States Department of the Treasury.

IN WITNESS WHEREOF, the Signatory to this bond does hereby affix his respective hand and seal on this <u>Thirty-first day of the third month</u> in the year two thousand and eleven.

Sign here in red and thumb print in red

(seal)

<u>Dorothy Louise Gale</u>, Principal/Underwriter Exemption ID # 123121234