State of New Hampshire
Department of State, UCC Division
Form EFS-1

Print Reset

For Filing Office Use Only:

A. Name and Phone of Contact at Requestor

B.Return to: (name and mailing address)

1. Debtor Name: Insert only one debtor in 1a or 1b.

1a. Business Name
OR
1b. Individual's Last Name First M.I. Suffix

1c. Mailing Address
City State Country Postal Code

2. Secured Party: Insert only one secured party in 2a or 2b.

2a. Business Name
OR
2b. Individual's Last Name First M.I. Suffix

2c. Mailing Address
City State Country Postal Code

County: _____ **Location:** _____ **Crop Year:** _____

ProductCode(s)	**Name(s) and Description(s)**

Signature(s) of Debtor(s)

Signature of Secured Party

Filed with: ___ Secretary of State Assignee: _____

Filing Fee: $15.00 Payable to "State Of New Hampshire"

New Hampshire Form EFS-1 Addendum

1. Additional Debtor Name: Insert <u>only one</u> debtor in 1a or 1b.

1a. Business Name **OR**	1c. Mailing Address
1b. Individual's Last Name First M.I. Suffix	City State Country Postal Code

2. Additional Debtor Name: Insert <u>only one</u> debtor in 2a or 2b.

2a. Business Name **OR**	2c. Mailing Address
2b. Individual's Last Name First M.I. Suffix	City State Country Postal Code