

Uniform Commercial Code Affidavit of Wrongful Filing

Filing number of financing statement asserted to have been filed wrongfully:

Person identified as a debtor in	the financing statement	filed under the filing number above:	
Name:			
Mailing Address:			
City:	State:	Postal Code:	
I, the undersigned, pursuant to	Minnesota Statute 336.9	9-5135, hereby affirm that I believe th	
the financing statement identified	ed above and identifying	me as debtor was not authorized to	
filed and was communicated or	caused to be communic	ated to the office of the Secretary of	
State with the intent to harass o	r defraud me.		
Signature:			
Printed Name:			
Date:			
	State of	County of	
	Signed and sw	vorn (or affirmed) before me on:	
Notary	(Date)	by (Name of individual	
Stamp	(Date)	making statement)	
	x		
		(Signature of notarial officer)	
		Title of office: My commission expires:	
		(Date)	
UCC- AFW Rev 09/11/2024			