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MARYLAND STATE DEPARTMENT OF  
ASSESSMENTS AND TAXATION  
UCC ONLINE ELECTRONIC FILING USER GUIDE



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<https://SDAT/UCCFiling/UCCMainPage.aspx>

*IN PARTNERSHIP WITH*



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## 1.0 – INTRODUCTION

The Maryland State Department of Assessments and Taxation’s office has served as the central filing office for public notices of secured transactions under Revised Article 9 of the Uniform Commercial Code. These public notices, called financing statements, indicate a commercial agreement between a debtor and a secured party.

Financing statements are filed by banks, mortgage companies, and other lending institutions against secured collateral. Searches of financing statements provide information on secured collateral. When a debtor pledges collateral on a loan, UCC search results tell lenders if others have filed a claim against the same collateral.

The Maryland State Department of Assessments and Taxation’s UCC Online system provides users with the capability to file all UCCs immediately and to conduct searches that will provide the user with immediate results. The delay normally experienced from having to mail in files is eliminated. If the user completes all mandatory fields, the filing is filed immediately. Payment for filings and certified copies may be made using a debit or credit card.

Privacy and security is assured via Secure Sockets Layer (SSL) protocol which encrypts the information being passed between the web server and the user’s computer.

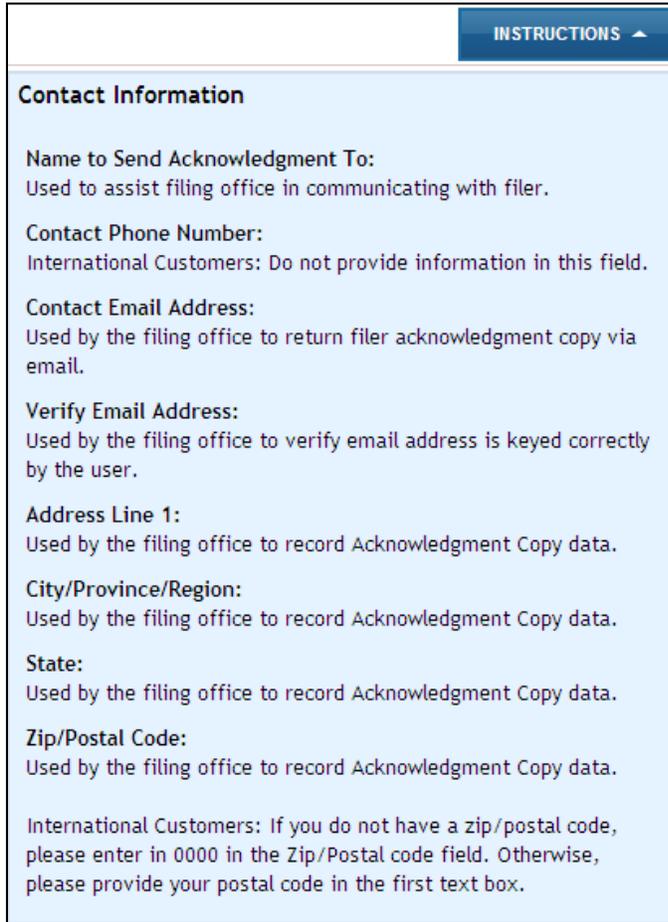
The Maryland UCC Online system is designed to be available 24-hours per day, seven days per week.

We have prepared this user manual to assist you in becoming familiar with the Maryland State Department of Assessments and Taxation’s UCC Online system. In addition, many pages within the application have associated “Instructions” which may be of use. Of course, the Maryland State Department of Assessments and Taxation’s office will be available to assist you as well.

## 2.0 – APPLICATION ELEMENTS

### 2.01 – INSTRUCTIONS

Page instructions can be viewed by clicking the Instructions button located at the top left of the page. Instructions will appear below the **INSTRUCTIONS** button.



The screenshot shows a blue button labeled "INSTRUCTIONS" with a small upward-pointing arrow. Below the button, a light blue panel is expanded to show the following text:

**Contact Information**

**Name to Send Acknowledgment To:**  
Used to assist filing office in communicating with filer.

**Contact Phone Number:**  
International Customers: Do not provide information in this field.

**Contact Email Address:**  
Used by the filing office to return filer acknowledgment copy via email.

**Verify Email Address:**  
Used by the filing office to verify email address is keyed correctly by the user.

**Address Line 1:**  
Used by the filing office to record Acknowledgment Copy data.

**City/Province/Region:**  
Used by the filing office to record Acknowledgment Copy data.

**State:**  
Used by the filing office to record Acknowledgment Copy data.

**Zip/Postal Code:**  
Used by the filing office to record Acknowledgment Copy data.

International Customers: If you do not have a zip/postal code, please enter in 0000 in the Zip/Postal code field. Otherwise, please provide your postal code in the first text box.

Click the **INSTRUCTIONS** button again to remove the page instructions from displaying on the page.

### 2.02 – PROGRESS INDICATOR

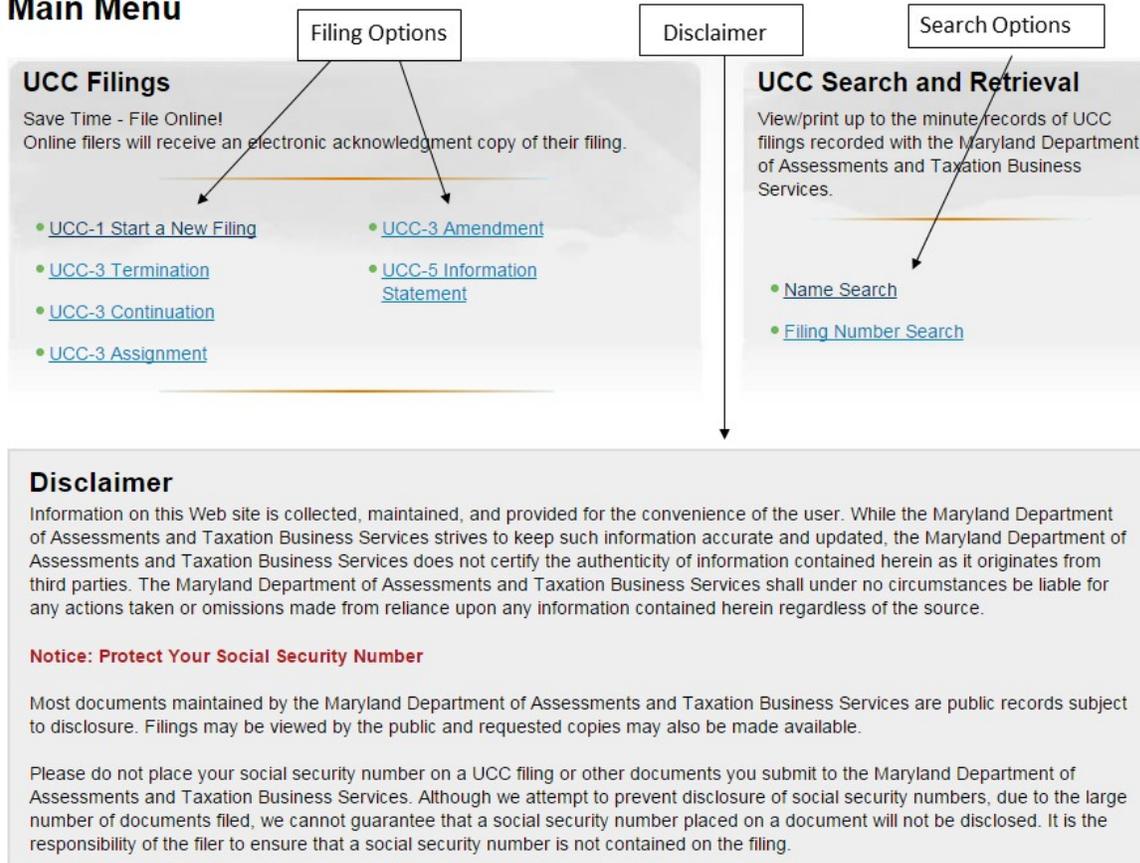
During the filing process, each page displays a progress indicator. The progress indicator provides the user with a visual representation of where they are in the filing process. The current step is highlighted.



## 3.0 – MAIN MENU

This page provides the user with options to file a UCC-1, UCC-3, or UCC-5 as well as options to search filings by name or filing number. Please note the disclaimer box at the bottom of this page. All users should read and pay special attention to this disclaimer statement.

### Main Menu



To begin using the UCC Online system, select one of the UCC Filing or UCC Search and Retrieval options.

The [UCC-1, Start a New Filing](#) link allows you to start the process to file a new initial financing.

The [UCC-3, Amendment](#), [UCC-3, Termination](#), [UCC-3, Assignment](#) and [UCC-3, Continuation](#) links allow you to start the process to file an amendment to an initial financing statement.

The [UCC-5, Information Statement](#) link allows you to start the process to file a correction to an initial financing statement.

The [Name Search](#) link allows you to search active filings by debtor or secured party name.

The [Filing Number Search](#) link allows you to search active filings by filing number.

## 4.0 – UCC-1, START A NEW FILING

This option is used to file the initial security interest.

The UCC-1 financing statement filing is divided into several web pages. Each page allows for the entry of a specific type of information. Please do not place your social security number on a UCC filing or any other document you submit to the Maryland State Department of Assessments and Taxation. Although we attempt to prevent disclosure of social security numbers, we cannot guarantee that a social security number placed on a document will not be disclosed due to the large number of documents filed. It is the responsibility of the filer to ensure that a social security number is not contained on the filing. Please note that all information entered on the following screens will be displayed on copies of the filing. Filings may be viewed by the public and requested copies may also be made available.

### 4.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-1 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

The screenshot shows a web form titled "Contact". At the top right is a blue button labeled "INSTRUCTIONS" with a dropdown arrow. Below it is a box labeled "Page Instructions" with an arrow pointing to the "INSTRUCTIONS" button. In the center is a box labeled "Required Fields" with three arrows pointing to three groups of fields: 1) "Send Acknowledgment To (Name)" (text input), 2) "Contact Email Address", "Verify Contact Email Address", and "Address Line 1" (text inputs), and 3) "City/Province/Region", "State" (dropdown menu showing "SELECT STATE"), "Zip/Postal Code" (two text inputs), and "Country" (dropdown menu showing "United States"). At the bottom left is a red "CANCEL" button, and at the bottom right are blue "BACK" and "CONTINUE" buttons.

Once the form has been filled out, click the **CONTINUE** button to move to the next step of the filing process.

### 4.02 – DEBTOR INFORMATION

The Debtor screen is used to allow for the entry of any number of debtors. When the screen is first displayed, the user can select whether the debtor is an individual or an organization. Any fields that should not be provided on the basis of the debtor type will be grayed out.

Information provided on this screen is the same information provided in Sections 1 and 2 of the UCC-1 form and Section 10 of the UCC-1Ad form. Enter only one debtor name in the Organization Name or Individual Name fields per page. If you have more than one debtor to provide, select the **ADD ANOTHER DEBTOR** button after you are done providing the information for the current debtor. If you do not have an additional debtor to add or you are done entering additional debtors, click the **CONTINUE** button to move to the next step of the filing process.

The screenshot shows the 'Debtor' form for an 'INDIVIDUAL DEBTOR'. At the top, there is a header 'Debtor' and 'INDIVIDUAL DEBTOR'. A red box highlights the 'INSTRUCTIONS' dropdown menu. Below the header, a message states: 'You must add at least one debtor before you can continue.' The 'Debtor Type' section has two radio buttons: 'Organization' and 'Individual', with 'Individual' selected and highlighted by a red box. A 'PAGE INSTRUCTIONS' box points to the 'Individual' radio button. The form contains several input fields, some of which are highlighted with red boxes and labeled as 'REQUIRED FIELDS' by a central box with arrows pointing to them. These required fields are: 'Individual First Name', 'Individual Last Name', 'Address Line 1', 'City/Province/Region', 'State', 'Zip/Postal Code', and 'Country'. Other fields include 'Organization Name', 'Individual Middle Name', 'Individual Suffix', 'Address Line 2', 'Organization Type', 'If Other:', 'Organization Jurisdiction' (set to 'Maryland (MD)'), and 'Organizational ID'. At the bottom right, there are two buttons: 'ADD ANOTHER DEBTOR' and 'CONTINUE'. A box labeled 'SELECT TO ADD ADDITIONAL DEBTORS' points to the 'ADD ANOTHER DEBTOR' button. Another box labeled 'SELECT IF REPORTING ONLY ONE DEBTOR' points to the 'CONTINUE' button. A 'BACK' button is also present. A 'CANCEL' button is located at the bottom left.

If the Debtor Type is an *individual*, note that **Individual First Name**, **Individual Last Name**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

**Debtor** INSTRUCTIONS ▾

**ORGANIZATION DEBTOR**

You must add at least one debtor before you can continue.

\* Debtor Type:  Organization  Individual PAGE INSTRUCTIONS

\*Organization Name

\*Individual First Name

Individual Middle Name

\*Individual Last Name

Individual Suffix

\*Address Line 1

Address Line 2

\*City/Province/Region

\*State

\*Zip/Postal Code

\*Country

\*Organization Type:

If Other:

\*Organization Jurisdiction:

Organizational ID

SELECT TO ADD ADDITIONAL DEBTORS → **ADD ANOTHER DEBTOR**

SELECT IF REPORTING ONLY ONE DEBTOR → **BACK** **CONTINUE**

**CANCEL**

If the Debtor Type is an *organization*, note that **Organization Name**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code**, **Country**, **Organization Type** and **Organization Jurisdiction** are all required fields.

The screenshot shows a web form titled "Debtor" with a "DEBTOR LIST" table at the top. The table has columns for "Debtor Type", "Debtor Name", and "Actions". One entry is shown: "Organization" with the name "TEST DEBTOR ORGANIZATION, LLP" and "Edit" and "Remove" links. Below the table are form fields for "Debtor Type" (Organization/Individual), "Organization Name", "Individual First Name", "Individual Middle Name", "Individual Last Name", "Individual Suffix", "Address same as First Debtor Address" (checkbox), "Address Line 1", "Address Line 2", "City/Province/Region", "State" (dropdown), "Zip/Postal Code", "Country" (dropdown), "Organization Type" (dropdown), "If Other:", "Organization Jurisdiction" (dropdown), and "Organizational ID". Callout boxes highlight the "Address same as First Debtor Address" checkbox and the "DEBTOR LIST" table. Buttons for "CANCEL", "ADD ANOTHER DEBTOR", "BACK", and "CONTINUE" are at the bottom.

Debtor Type	Debtor Name	Actions
Organization	TEST DEBTOR ORGANIZATION, LLP	<a href="#">Edit</a> <a href="#">Remove</a>

• Debtor Type:  Organization  Individual

\*Organization Name:

•Individual First Name:

Individual Middle Name:

•Individual Last Name:

Individual Suffix:

Address same as First Debtor Address:

\*Address Line 1:

Address Line 2:

\*City/Province/Region:

\*State:

\*Zip/Postal Code:

\*Country:

\*Organization Type:

If Other:

\*Organization Jurisdiction:

Organizational ID:

[CANCEL](#) [ADD ANOTHER DEBTOR](#) [BACK](#) [CONTINUE](#)

If more than one debtor is entered, each debtor name provided by the user is displayed at the top of the page. If the user determines that information for the debtor is incorrect, the user can easily edit or remove the debtor by selecting the appropriate link.

In order to make online filing as efficient as possible, additional debtors have an option to allow the user to use the same debtor address as the first debtor. By checking the “Address same as First Debtor Address” checkbox, the Address Line 1, Address Line 2, City/Province/Region, State, Zip/Postal Code and Country will be populated with the same information as the first debtor.

Once you have finished entering debtors, click the **CONTINUE** button to move to the next step of the filing process.

### 4.03 – SECURED PARTY INFORMATION

The Secured Party screen is used to allow for the entry of one or more secured parties. Like the debtor screen, the user can select whether the secured party is an individual or an organization. Any fields that should not be provided on the basis of the secured party type will be grayed out.

Information provided on this screen is the same information provided in Section 3 of the UCC-1 form and Section 11 of the UCC-1Ad form. Enter only one secured party name in the Organization Name or Individual Name fields per page. If you have more than one secured party to provide, select the **ADD ANOTHER SECURED PARTY** button after you are done providing the information for the current secured party. If you do not have an additional secured party to add or you are done entering additional secured parties, click the **CONTINUE** button to move to the next step of the filing process.

The screenshot shows the 'Secured Party' form for an 'INDIVIDUAL SECURED PARTY'. The form is titled 'Secured Party' and 'INDIVIDUAL SECURED PARTY'. It includes a red box around the 'Individual' radio button under 'Secured Party Type'. A red box highlights the 'Individual First Name', 'Individual Last Name', 'Address Line 1', and 'City/Province/Region' fields, with a callout 'REQUIRED FIELDS' pointing to them. Another callout 'SELECT "YES" TO USE ADDRESS PROVIDED IN CONTACT INFORMATION' points to the 'Secured Party Address is the same as Contact Information' radio buttons. A callout 'CLICK TO ADD ADDITIONAL SECURED PARTIES' points to the 'ADD ANOTHER SECURED PARTY' button. A callout 'CLICK IF REPORTING ONLY ONE SECURED PARTY' points to the 'CONTINUE' button. Other callouts include 'INSTRUCTIONS' and 'PAGE INSTRUCTIONS' pointing to the top right, and 'CANCEL' pointing to the bottom left button.

If the Secured Party Type is an *individual*, note that **Individual First Name**, **Individual Last Name**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

**Secured Party** INSTRUCTIONS ▾

**ORGANIZATION SECURED PARTY**

*You must add at least one secured party before you can continue.*

\*Secured Party Type:  Organization  
 Individual

\*Organization Name

\*Individual First Name

Individual Middle Name

\*Individual Last Name

Individual Suffix

Secured Party Address is the same as Contact Information  Yes  
 No

\*Address Line 1

Address Line 2

\*City/Province/Region

\*State

\*Zip/Postal Code

\*Country

Annotations:  
 - PAGE INSTRUCTIONS (points to INSTRUCTIONS dropdown)  
 - REQUIRED FIELDS (points to Organization Name, Address Line 1, City/Province/Region, State, Zip/Postal Code, Country)  
 - SELECT "YES" TO USE ADDRESS PROVIDED IN CONTACT INFORMATION (points to Yes radio button)  
 - CLICK TO ADD ADDITIONAL SECURED PARTIES (points to ADD ANOTHER SECURED PARTY button)  
 - CLICK IF REPORTING ONLY ONE SECURED PARTY (points to BACK button)

If the Secured Party Type is an *organization*, note that **Organization Name, Address Line 1, City/Province/Region, State, Zip/Postal Code, and Country** are all required fields.

**Secured Party** INSTRUCTIONS ▾

**SECURED PARTY LIST**

Secured Party Type	Secured Party Name	Actions
Organization	TEST SECURED PARTY	<a href="#">Edit</a> <a href="#">Remove</a>

\*Secured Party Type:  Organization  
 Individual

\*Type:  Additional Secured Party  
 Assignor Secured Party

\*Organization Name

\*Individual First Name

Individual Middle Name

\*Individual Last Name

Individual Suffix

Secured Party Address is the same as Contact Information  Yes  
 No

\*Address Line 1

Address Line 2

\*City/Province/Region

\*State

\*Zip/Postal Code

\*Country

Annotations:  
 - ALL SECURED PARTY(S) ENTERED WILL DISPLAY IN THIS LIST (points to SECURED PARTY LIST table)  
 - YOU MUST SELECT WHETHER PARTY IS AN ADDITIONAL OR A SIGNOR SECURED PARTY (points to Type radio buttons)

If more than one secured party is entered, each secured party name provided by the user is displayed at the top of the page. If the user determines that information for the secured party is incorrect, the user can easily edit or remove the secured party by selecting the appropriate link.

In order to make online filing as efficient as possible, additional secured parties have an option to allow the user to use the same address as provided on the Contact Information page (see 6.01). By selecting “Yes” for “Secured Party Address is the same as Contact Information,” Address Line 1, Address Line 2, City/Province/Region, State, Zip/Postal Code and Country will be populated with the same information as provided by the user on the Contact Information page.

Once you have finished entering debtors, click the **CONTINUE** button to move to the next step of the filing process.

#### 4.04 – COLLATERAL INFORMATION

This page allows for the entry or upload of collateral used for security by the secured party(s). The user may type collateral information, paste from text composed in a word processing software (i.e., Word, WordPerfect, Notepad, and WordPad) or upload a file that is in either PDF or TIFF file format.

**Collateral** PAGE INSTRUCTIONS → INSTRUCTIONS ▾

**You must type collateral OR upload collateral information before you can continue filing. Please select an option below to enter collateral.**

Type Collateral Description (Max Length 950 characters)  
 Upload Collateral Document(s)

**State Department of Assessments & Taxation is not responsible for the correctness or acceptability of listed collateral. Burden is on the Filer to ensure acceptable collateral is listed (tangible assets).**

The Financing Statement covers the following collateral:

Max length 950 characters.

TYPE OR COPY & PASTE TEST HERE

SELECT TO ADD ADDITIONAL COLLATERAL → ADD ANOTHER COLLATERAL

CANCEL      SELECT IF DONE REPORTING COLLATERAL      BACK      CONTINUE

## Collateral

PAGE INSTRUCTIONS

INSTRUCTIONS

**You must type collateral OR upload collateral information before you can continue filing. Please select an option below to enter collateral.**

- Type Collateral Description (Max Length 950 characters)
- Upload Collateral Document(s)

UPLOAD PDF OR TIFF DOCUMENT

Upload Collateral

Choose File No file chosen

UPLOAD

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.

SELECT TO ADD ADDITIONAL COLLATERAL

ADD ANOTHER COLLATERAL

SELECT IF DONE REPORTING COLLATERAL

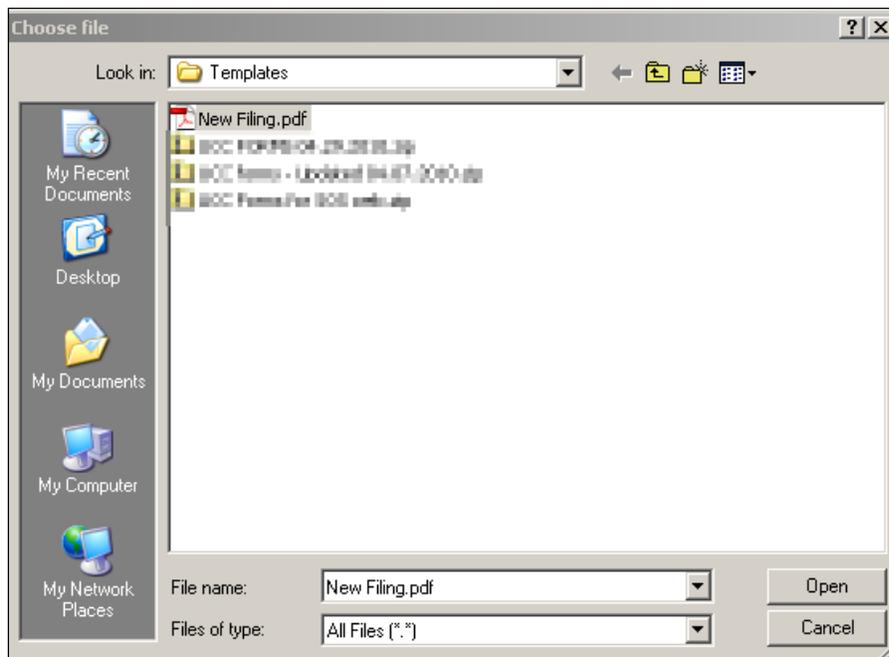
CANCEL

BACK

CONTINUE

Information provided on this screen is the same information provided in Section 4 of the UCC-1 form and Section 12 of the UCC-1Ad form.

To upload collateral, select the Browse... button and locate the file on your computer you wish to upload and attach to the filing.



Once the file is located, select the file and the click the Open button.

Upload Collateral

SDAT Collateral upload.pdf

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.

The file you selected will display in the Upload Collateral box. Click the **UPLOAD** button.

### Collateral

**COLLATERAL UPLOADED FILE(S)**

File Name	Actions
SDAT Collateral upload.pdf	<a href="#">Remove</a>

You must type collateral OR upload collateral information before you can continue filing. Please select an option below to enter collateral.

Type Collateral Description (Max Length 950 characters)  
 Upload Collateral Document(s)

ALL COLLATERAL ENTERED WILL DISPLAY IN THIS LIST

State Department of Assessments & Taxation is not responsible for the correctness or acceptability of listed collateral. Burden is on the Filer to ensure acceptable collateral is listed (tangible assets).

The Financing Statement covers the following collateral:

Max length 950 characters.

If more than one file is uploaded or typed, each collateral entry provided by the user is displayed at the top of the page. If the user determines that information or file associated with the collateral is incorrect, the user can easily edit or remove the collateral by selecting the appropriate link.

**Note:** Uploading one or more files will increase the number of pages in your submission.

Once you have finished entering collateral, click the **CONTINUE** button to move to the next step of the filing process.

#### 4.05 – ADDITIONAL INFORMATION

The Additional Information screen is used capture any information provided under the following fields: “Alternative Designation” [UCC-1 form, Section 7], “This Financing Statement covers” [UCC-1Ad form, Section 14], “Debtor is a” [UCC-1Ad form, Box 10], “Other”, “Optional Filer Reference Data” [UCC-1 form, Section 8], and “Upload additional information.”

The default value selected for each of these categories is N/A (none). To change, the user simply clicks the selection that is applicable to the filing.

Once you have finished entering additional information, click the **CONTINUE** button to move to the next step of the filing process.

#### 4.06 – REAL ESTATE INFORMATION

The Real Estate Information screen is used capture the description of the real estate and the name and address of a record owner of the real estate described. This screen can be used to report one or multiple real estate descriptions.

This screen only displays if the user selects an option other than “N/A (none)” in the “This Financing Statement Covers: [if applicable]” display in the previous step (Item 6.05).

Information provided on this screen is the same information provided in Sections 15 and 16 of the UCC-1Ad form. Enter only one real estate description per page. If you have more than one real estate description to add, select the **ADD ANOTHER RECORD OWNER** button. If you do not have additional record owners to add or you are done entering additional record owners, click the **CONTINUE** button to move to the next step of a filing.

The screenshot shows the 'Real Estate' form interface. At the top left is the title 'Real Estate'. To its right is a 'PAGE INSTRUCTIONS' button with a dropdown arrow pointing to an 'INSTRUCTIONS' button. Below the title is a large text area for 'Description of Real Estate:'. To the right of this area is a callout box: 'USE TO DESCRIBE REAL ESTATE [UCC-1Ad, BOX 14]'. Below the description area is the 'Record Owner Type:' section with three radio button options: 'N/A' (selected), 'Organization', and 'Individual'. A callout box 'USE TO REPORT RECORD OWNER TYPE [UCC-1Ad, BOX 15]' points to the 'Organization' and 'Individual' options. Below this are input fields for 'Organization Name', 'Individual First Name', 'Individual Middle Name', 'Individual Last Name', and 'Individual Suffix'. At the bottom right, there is a 'SELECT TO ADD ANOTHER RECORD OWNER' button pointing to an 'ADD ANOTHER RECORD OWNER' button. Below that is a 'SELECT AFTER LAST RECORD OWNER HAS BEEN REPORTED' button pointing to 'BACK' and 'CONTINUE' buttons. A 'CANCEL' button is located at the bottom left.

If the Record Owner type is N/A, then all of the name and address fields are grayed out and this information is not required.

The screenshot shows the 'ORGANIZATION RECORD OWNER' form. A red box highlights the 'Description of Real Estate' field, with an annotation 'USE TO DESCRIBE REAL ESTATE [UCC-1Ad, BOX 14]'. Another red box highlights the 'Record Owner Type' section, with an annotation 'USE TO REPORT RECORD OWNER TYPE [UCC-1Ad, BOX 15]'. A 'REQUIRED FIELDS' box has arrows pointing to the 'Organization Name', 'Address Line 1', 'City/Province/Region', 'State', 'Zip/Postal Code', and 'Country' fields. A 'SELECT TO ADD ANOTHER RECORD OWNER' box points to the 'ADD ANOTHER RECORD OWNER' button. At the bottom, a 'SELECT AFTER LAST RECORD OWNER HAS BEEN REPORTED' box points to the 'BACK' and 'CONTINUE' buttons. The 'CANCEL' button is also visible.

If the Record Owner type is *organization*, then **Organization Name**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

The screenshot shows the 'INDIVIDUAL RECORD OWNER' form. A red box highlights the 'Description of Real Estate' field, with an annotation 'USE TO DESCRIBE REAL ESTATE [UCC-1Ad, BOX 14]'. Another red box highlights the 'Record Owner Type' section, with an annotation 'USE TO REPORT RECORD OWNER TYPE [UCC-1Ad, BOX 15]'. A 'REQUIRED FIELDS' box has arrows pointing to the 'Individual First Name', 'Individual Last Name', 'Address Line 1', 'City/Province/Region', 'State', 'Zip/Postal Code', and 'Country' fields. A 'SELECT TO ADD ANOTHER RECORD OWNER' box points to the 'ADD ANOTHER RECORD OWNER' button. At the bottom, a 'SELECT AFTER LAST RECORD OWNER HAS BEEN REPORTED' box points to the 'BACK' and 'CONTINUE' buttons. The 'CANCEL' button is also visible.

If the Record Owner type is *individual*, then **Individual First Name, Individual Last Name, Address Line 1, City/Province/Region, State, Zip/Postal Code** and **Country** are all required fields.

Record Owner Name	Real Estate Description	Actions
	Test real estate information	<a href="#">Edit</a> <a href="#">Remove</a>

\*Description of Real Estate:

\*Record Owner Type:

N/A  
 Organization  
 Individual

\*Organization Name

\*Individual First Name

Individual Middle Name

\*Individual Last Name

Individual Suffix

ADD ANOTHER RECORD OWNER

CANCEL

BACK CONTINUE

If more than one real estate description is entered, each real estate description provided by the user is displayed at the top of the page. If the user determines that information provided for the real estate description is incorrect, the user can easily edit or remove the description by selecting the appropriate link.

Once you have finished entering real estate information, click the **CONTINUE** button to move to the next step of the filing process.

## 4.07 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

The screenshot displays the 'Filing Summary' page with a warning message: 'Your UCC Filing is not yet complete. Please review the information below for accuracy.' The page is divided into five sections, each with an 'EDIT' button:

- CONTACT INFORMATION**: Includes fields for Business Name (JOHN Q. FILER), Contact Address (111 Nowhere Lane, COLUMBIA, MD 21045, Country: US), Contact Name, Contact Phone, Contact Phone Extension, and Contact Email Address (nancy@portal.sc.gov). The 'EDIT CONTACT' button is highlighted.
- DEBTOR INFORMATION**: Includes fields for Debtor Type (Organization), Organization Name (TEST DEBTOR ORGANIZATION, LLP), Address (111 Test Street, COLUMBIA, MD 21045, Country: US), and Organization Type (LLC, SC). The 'EDIT DEBTOR(S)' button is highlighted.
- SECURED PARTY INFORMATION**: Includes fields for Secured Party Type (Organization), Organization Name (TEST ORGANIZATION SECURED PARTY), and Address (111 Nowhere Lane, COLUMBIA, MD 21045, Country: US). The 'EDIT SECURED PARTY(S)' button is highlighted.
- COLLATERAL INFORMATION**: Includes a field for 'The Financing Statement covers the following collateral:' and a 'File(s) Attached:' field with 'starsman.pdf'. The 'EDIT COLLATERAL(S)' button is highlighted.
- ADDITIONAL INFORMATION**: Includes fields for Alternative Designation (N/A), Debtor is a: (N/A), The Financing Statement covers: (Timber to be cut), and Other (N/A). The 'EDIT INFORMATION' button is highlighted.

A box labeled 'EDIT BUTTONS' has lines pointing to each of the five highlighted edit buttons.

REAL ESTATE INFORMATION		
Description of Real Estate:		Real Estate Description
<a href="#">EDIT REAL ESTATE</a>		

ITEMS SELECTED FOR PURCHASE		
ITEM	# of Pages	PRICE
UCC-1 Filing Fee	2	\$25.00
<b>Total Amount to be Charged:</b>		<b>\$25.00</b>

Order Summary

**Please Confirm**

I have verified that all of the above information is correct and complete.

Verification that the filing information has been reviewed and is correct

[CANCEL](#) [BACK](#) [CONTINUE](#)

If all of the information in the filing summary is correct, check the **Please Confirm** box and then select the **CONTINUE** button to move to the next step of the filing process.

## 4.08 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken to a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover credit cards or debit card.

**Payment**

Payment Type ✓ [Edit](#)

**Credit Card**

**Customer Information**

Country Complete all required fields [ \* ]  
United States

First Name \*  Last Name \*

Address \*

Address 2

City \*  State \*

ZIP/Postal Code \*

Phone  Email \*

[Next >](#)

**Payment Info**

[Cancel](#)

**Transaction Summary**

UCC-1 Filing Fee	\$20.00
<b>Transaction Summary</b>	<b>\$20.00</b>

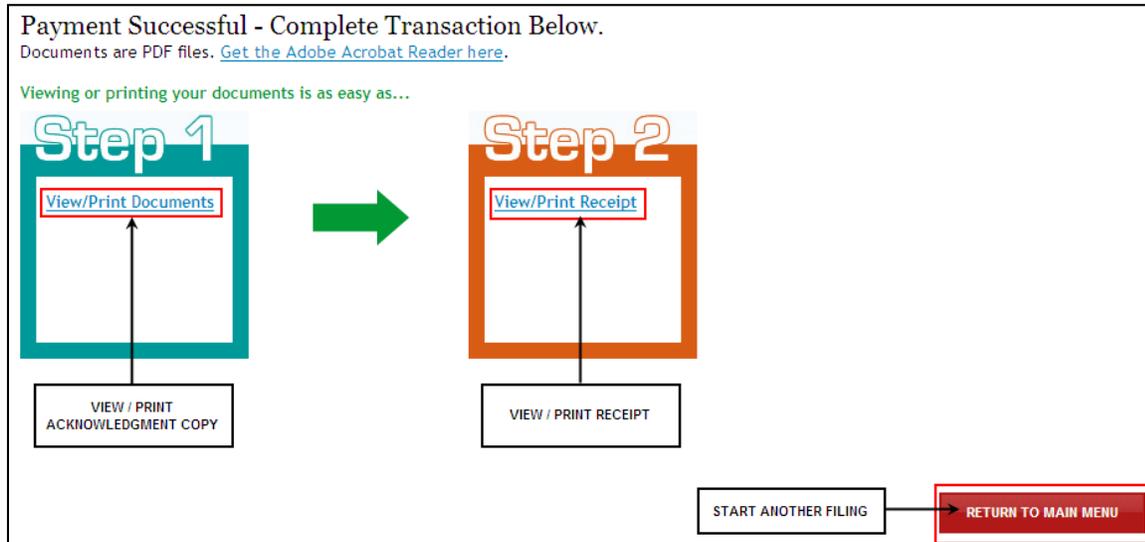
**Need Help?**  
Please complete the Customer Information Section

## 4.09 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user will see a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's Office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.



SAMPLE RECEIPT

# Receipt

Print Receipt

[Print Receipt](#)

TRANSACTION HISTORY	
File ID Number	160311-1218075
Acknowledge Copy To	test
Email Address	Test@test.com
Subscriber Account Name	John Doe
Subscriber Account Number	2692462
Filing Date/Time	3/11/2016 12:18 PM

 Your Subscriber account will reflect that the charge was made by Maryland.gov.

ITEMS PURCHASED		
Item	# of Pages	Price
UCC Assignment Filing Fee	1	\$25.00
<b>Total Amount Charged</b>		<b>\$25.00</b>

BACK

SAMPLE ACKNOWLEDGMENT COPY

<h2 style="margin: 0;">UCC-1</h2>	<p style="text-align: center;"><b>UCC FINANCING STATEMENT</b> FOLLOW INSTRUCTIONS</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</td> <td style="width: 50%;"></td> </tr> <tr> <td style="padding: 2px;">B. E-MAIL CONTACT AT FILER (optional)</td> <td></td> </tr> <tr> <td style="padding: 2px;">C. SEND ACKNOWLEDGMENT TO: (Name and Address)</td> <td></td> </tr> <tr> <td style="padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">                     Mr. Spock 234 Winslow Gardens  Annapolis, MD 21401                 </div> </td> <td></td> </tr> </table>	A. NAME & PHONE OF CONTACT AT FILER (optional)		B. E-MAIL CONTACT AT FILER (optional)		C. SEND ACKNOWLEDGMENT TO: (Name and Address)		<div style="border: 1px solid black; padding: 2px;">                     Mr. Spock 234 Winslow Gardens  Annapolis, MD 21401                 </div>																									
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	<p style="text-align: center;">MD DEPT. OF ASSESSMENTS &amp; TAXATION 160316-1608298 NS Lapse Date: 03/16/2021</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Date:</td> <td style="width: 25%;">3/16/2016</td> <td style="width: 25%;">Page Count:</td> <td style="width: 25%;">1 Pg</td> </tr> <tr> <td>Time</td> <td>4:08 PM</td> <td>Debtor Count:</td> <td>1</td> </tr> <tr> <td>Filing Fees:</td> <td>\$25.00</td> <td>Electronic Records Access:</td> <td>\$0.00</td> </tr> <tr> <td><b>Total:</b></td> <td><b>\$25.00</b></td> <td><b>Order ID#</b></td> <td><b>16161562</b></td> </tr> </table>	Date:	3/16/2016	Page Count:	1 Pg	Time	4:08 PM	Debtor Count:	1	Filing Fees:	\$25.00	Electronic Records Access:	\$0.00	<b>Total:</b>	<b>\$25.00</b>	<b>Order ID#</b>	<b>16161562</b>																
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THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY																																	
<p><b>1. DEBTOR'S NAME:</b> Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here <input type="checkbox"/> and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4">1a. ORGANIZATION'S NAME</td> </tr> <tr> <td colspan="4">OR</td> </tr> <tr> <td style="width: 40%;">1b. INDIVIDUAL'S SURNAME</td> <td style="width: 20%;">FIRST PERSONAL NAME</td> <td style="width: 20%;">ADDITIONAL NAME(S)/INITIAL(S)</td> <td style="width: 20%;">SUFFIX</td> </tr> <tr> <td>Kirk</td> <td>James</td> <td>Tiberius</td> <td></td> </tr> <tr> <td colspan="2">1c. MAILING ADDRESS</td> <td>CITY</td> <td>STATE</td> </tr> <tr> <td colspan="2">2345 Enterprise Drive</td> <td>Starfleet</td> <td>MD</td> </tr> <tr> <td colspan="2"></td> <td>POSTAL CODE</td> <td>COUNTRY</td> </tr> <tr> <td colspan="2"></td> <td>21401</td> <td>US</td> </tr> </table>		1a. ORGANIZATION'S NAME				OR				1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	Kirk	James	Tiberius		1c. MAILING ADDRESS		CITY	STATE	2345 Enterprise Drive		Starfleet	MD			POSTAL CODE	COUNTRY			21401	US
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<p><b>2. DEBTOR'S NAME:</b> Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here <input type="checkbox"/> and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4">2a. ORGANIZATION'S NAME</td> </tr> <tr> <td colspan="4">OR</td> </tr> <tr> <td style="width: 40%;">2b. INDIVIDUAL'S SURNAME</td> <td style="width: 20%;">FIRST PERSONAL NAME</td> <td style="width: 20%;">ADDITIONAL NAME(S)/INITIAL(S)</td> <td style="width: 20%;">SUFFIX</td> </tr> <tr> <td colspan="2">2c. MAILING ADDRESS</td> <td>CITY</td> <td>STATE</td> </tr> <tr> <td colspan="2"></td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>POSTAL CODE</td> <td>COUNTRY</td> </tr> <tr> <td colspan="2"></td> <td></td> <td></td> </tr> </table>		2a. ORGANIZATION'S NAME				OR				2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	2c. MAILING ADDRESS		CITY	STATE							POSTAL CODE	COUNTRY								
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<p><b>3. SECURED PARTY'S NAME (or NAME OF ASSIGNEE OF ASSIGNOR SECURED PARTY):</b> Provide only one Secured Party name (3a or 3b)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4">3a. ORGANIZATION'S NAME</td> </tr> <tr> <td colspan="4">Starfleet</td> </tr> <tr> <td colspan="4">OR</td> </tr> <tr> <td style="width: 40%;">3b. INDIVIDUAL'S SURNAME</td> <td style="width: 20%;">FIRST PERSONAL NAME</td> <td style="width: 20%;">ADDITIONAL NAME(S)/INITIAL(S)</td> <td style="width: 20%;">SUFFIX</td> </tr> <tr> <td colspan="2">3c. MAILING ADDRESS</td> <td>CITY</td> <td>STATE</td> </tr> <tr> <td colspan="2">234 Winslow Gardens</td> <td>Annapolis</td> <td>MD</td> </tr> <tr> <td colspan="2"></td> <td>POSTAL CODE</td> <td>COUNTRY</td> </tr> <tr> <td colspan="2"></td> <td>21401</td> <td>US</td> </tr> </table>		3a. ORGANIZATION'S NAME				Starfleet				OR				3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	3c. MAILING ADDRESS		CITY	STATE	234 Winslow Gardens		Annapolis	MD			POSTAL CODE	COUNTRY			21401	US
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<p><b>4. COLLATERAL:</b> This financing statement covers the following collateral: <b>Collateral</b></p>																																	
<p><b>5.</b> Check <i>only</i> if applicable and check <i>only</i> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative</p> <p><b>6a.</b> Check <i>only</i> if applicable and check <i>only</i> one box:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> Public-Finance Transaction</td> <td><input type="checkbox"/> Manufactured-Home Transaction</td> <td><input type="checkbox"/> A Debtor is a Transmitting Utility</td> </tr> </table> <p><b>6b.</b> Check <i>only</i> if applicable and check <i>only</i> one box:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> Agricultural Lien</td> <td><input type="checkbox"/> Non-UCC Filing</td> </tr> </table> <p><b>7. ALTERNATIVE DESIGNATION (if applicable):</b> <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor</p> <p><b>8. OPTIONAL FILER REFERENCE DATA:</b></p>		<input type="checkbox"/> Public-Finance Transaction	<input type="checkbox"/> Manufactured-Home Transaction	<input type="checkbox"/> A Debtor is a Transmitting Utility	<input type="checkbox"/> Agricultural Lien	<input type="checkbox"/> Non-UCC Filing																											
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(Rev. 04/20/11)																																	

## 5.0 – UCC-3 AMENDMENT

### 5.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-3 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

The screenshot shows a web form titled "Contact". The form contains several input fields and dropdown menus. A red box highlights the following fields: "Send Acknowledgment To (Name)", "Contact Email Address", "Verify Contact Email Address", "Address Line 1", "City/Province/Region", "State", "Zip/Postal Code", and "Country". A blue box labeled "INSTRUCTIONS" is located in the top right corner. A box labeled "Page Instructions" has an arrow pointing to the "INSTRUCTIONS" box. A box labeled "Required Fields" has arrows pointing to the red-bordered fields. At the bottom of the form, there are three buttons: "CANCEL" (red), "BACK" (blue), and "CONTINUE" (blue).

### 5.02 – FILING NUMBER LOOKUP

The user must indicate whether they are a debtor or secured party making the filing and enter the filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filer Is A** and **Filing Number** are required fields.

### FILER IS A DEBTOR

**Amendment Request**

\*Filer Is A  Debtor  Secured Party

\*Filing Number

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

REQUIRED FIELDS

SELECT TO CONTINUE FILING

CANCEL BACK CONTINUE

### FILER IS A SECURED PARTY

**Amendment Request**

\*Filer Is A  Debtor  Secured Party

\*Filing Number

\*What area would you like to make an amendment to?  Debtor  Secured Party

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

REQUIRED FIELDS

SELECT TO CONTINUE FILING

CANCEL BACK CONTINUE

## 5.03 – AMENDMENT ACTION

### DEBTOR FILER AMENDMENT ACTIONS

Debtor party filers have the option to amend an existing debtor party(s), add new debtor party(s), and/or amend collateral.

**Amendment Selection**

Verify the following information is correct:

Filing Number: 110311-0902453  
Primary Secured Party: TEST ORGANIZATION SECURED PARTY  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered](#).

DEBTOR(S)			
Debtor Type	Debtor Name	Address	Action
Organization	TEST DEBTOR ORGANIZATION, LLP	111 Test Street COLUMBIA, MD 21045 Country: US	N/A

**ADD NEW DEBTOR**

COLLATERAL	
Collateral Description	Type

**AMEND COLLATERAL**

AMENDMENT - PENDING ACTIONS			
Type	Modified Party	Modification	

**CANCEL**      **AMENDMENT ACTIONS DISPLAY HERE**      **SELECT TO CONTINUE FILING**      **BACK**      **CONTINUE**

### SECURED PARTY FILER AMENDMENT ACTIONS

Secured party filers have the option to amend an existing party(s), add new party(s), delete existing party(s) and/or amend collateral.

**Amendment Selection**

Verify the following information is correct:

Filing Number: 110311-0902453  
Primary Secured Party: TEST ORGANIZATION SECURED PARTY  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered.](#)

SECURED PARTY(S)				
Secured Party Type	Secured Party Name	Address	Status	Action
Organization	TEST ORGANIZATION SECURED PARTY	111 Nowhere Lane COLUMBIA, MD 21045 Country: US	N/A	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

**ADD NEW SECURED PARTY**

COLLATERAL	
Collateral Description	Type

**AMEND COLLATERAL**

AMENDMENT - PENDING ACTIONS		
Type	Modified Party	Modification

**CANCEL** **SELECT TO CONTINUE FILING** **BACK** **CONTINUE**

### 5.04 – AUTHORIZING PARTY

Amendments must be authorized by a secured party or debtor. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 9 of the UCC-3 form.

**Authorizing Party**

Verify the following information is correct:

Filing Number: 110311-0902453  
Primary Secured Party: TEST ORGANIZATION SECURED PARTY  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered.](#)

AUTHORIZING PARTY(S)		
#	Debtor Type	Debtor Name
<input type="checkbox"/>	Organization	TEST DEBTOR ORGANIZATION, LLP

**CANCEL** **SELECT 1 OR MORE AUTHORIZING PARTY(S)** **SELECT TO CONTINUE FILING** **BACK** **CONTINUE**

## 5.05 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

**Summary**  
Your UCC-3 Amendment Filing is not yet complete. Please review the information below for accuracy.

**CONTACT INFORMATION**

Send Acknowledgement To (Name): JOHN Q. FILER  
Contact Address: 111 Nowhere Lane  
COLUMBIA, MD 21045  
Country: US  
Contact Name:  
Contact Phone:  
Contact Phone Extension:  
Contact Email Address: test@yahoo.com

**FILING REQUEST INFORMATION**

Filer Is As: Debtor  
Filing Numbers: 110311-0902453  
Primary Secured Party Type: Organization  
Primary Secured Party: TEST ORGANIZATION SECURED PARTY

**AMENDMENT SELECTION - PENDING ACTIONS**

Type	Modified Party	Modification
Collateral	N/A	Add

**AUTHORIZING DEBTOR(S)**

Debtor Type	Debtor Name
Organization	TEST DEBTOR ORGANIZATION, LLP

Optional Filer Reference Data:

**ITEMS SELECTED FOR PURCHASE**

ITEM	# of Pages	PRICE
UCC Amendment Filing Fee	1	\$25.00
Total Amount to be Charged:		\$25.00

**Please Confirm**

I have verified that all of the above information is correct and complete

VERIFICATION THAT FILING HAS BEEN REVIEWED & IS CORRECT

**CANCEL** **SELECT TO CONTINUE FILING** **DATA** **CONTINUE**

**EDIT CONTACT**  
**EDIT REQUES.**  
**EDIT AMENDMENT ACTION(S)**  
**EDIT AUTHORIZING PARTY**

**EDIT BUTTONS**

## 5.06 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Payment**

Payment Type ✓ [Edit](#)

**Credit Card**

**Customer Information**

Country Complete all required fields [ \* ]  
United States

First Name \*

Last Name \*

Address \*

Address 2

City \*

State \*

ZIP/Postal Code \*

Phone

Email \*

[Next >](#)

**Payment Info**

[Cancel](#)

**Transaction Summary**

UCC-1 Filing Fee	\$20.00
<b>Transaction Summary</b>	<b>\$20.00</b>

**Need Help?**  
Please complete the Customer Information Section

## 5.07 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user sees a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's Office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.

**Payment Successful - Complete Transaction Below.**  
Documents are PDF files. [Get the Adobe Acrobat Reader here.](#)

Viewing or printing your documents is as easy as...

The diagram illustrates a two-step process. Step 1, labeled 'Step 1' in a blue box, shows a 'View/Print Documents' button with an arrow pointing to a 'VIEW / PRINT ACKNOWLEDGMENT COPY' box. Step 2, labeled 'Step 2' in an orange box, shows a 'View/Print Receipt' button with an arrow pointing to a 'VIEW / PRINT RECEIPT' box. A green arrow points from Step 1 to Step 2. At the bottom right, there are two buttons: 'START ANOTHER FILING' and 'RETURN TO MAIN MENU'.

### SAMPLE RECEIPT

**Receipt**

[Print Receipt](#)

**TRANSACTION HISTORY**

Acknowledge Copy To	JOHN Q. FILER
Email Address	test@yahoo.com
Card Type	Visa *1111
Name on Card	JOHN Q. FILER
TPE Order ID Number	126232
File ID Number	110330-1249183
Filing Date/Time	3/30/2011 12:49 PM

Your bank statement will reflect that the charge was made by MARYLAND GOVPAY.

**ITEMS PURCHASED**

Item	Price
UCC Amendment Filing Fee	\$25.00
<b>Total Amount Charged</b>	<b>\$25.00</b>

[PRINT RECEIPT](#)

[BACK](#)

SAMPLE ACKNOWLEDGMENT COPY

  	<h1 style="margin: 0;">UCC-3</h1>	<p style="font-size: small; margin: 0;">MD DEPT. OF ASSESSMENTS &amp; TAXATION</p> <p style="font-size: small; margin: 0;">160316-1600121 NS</p> <p style="font-size: small; margin: 0;">Date: 3/16/2016</p> <p style="font-size: small; margin: 0;">Time: 4:00 PM</p> <p style="font-size: small; margin: 0;">Page Count: 1 Pg</p> <p style="font-size: small; margin: 0;">Debtor Count:</p> <p style="font-size: small; margin: 0;">Filing Fees: \$25.00</p> <p style="font-size: small; margin: 0;">Electronic Records Access: \$0.00</p> <p style="font-size: small; margin: 0;">Total: \$25.00</p> <p style="font-size: small; margin: 0;">Order ID# 16161520</p>				
<h2 style="margin: 0;">UCC FINANCING STATEMENT AMENDMENT</h2> <p style="font-size: x-small; margin: 0;">FOLLOW INSTRUCTIONS</p>						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 100%; padding: 2px;">A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</td> </tr> <tr> <td style="padding: 2px;">B. E-MAIL CONTACT AT FILER (optional)</td> </tr> <tr> <td style="padding: 2px;">C. SEND ACKNOWLEDGMENT TO: (Name and Address)</td> </tr> <tr> <td style="padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">                     Napoleon Bonaparte                      234 Winslow Gardens                        Annapolis, MD 21401                 </div> </td> </tr> </table>			A. NAME & PHONE OF CONTACT AT FILER (optional)	B. E-MAIL CONTACT AT FILER (optional)	C. SEND ACKNOWLEDGMENT TO: (Name and Address)	<div style="border: 1px solid black; padding: 2px;">                     Napoleon Bonaparte                      234 Winslow Gardens                        Annapolis, MD 21401                 </div>
A. NAME & PHONE OF CONTACT AT FILER (optional)						
B. E-MAIL CONTACT AT FILER (optional)						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
<div style="border: 1px solid black; padding: 2px;">                     Napoleon Bonaparte                      234 Winslow Gardens                        Annapolis, MD 21401                 </div>						
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY						
1a. INITIAL FINANCING STATEMENT FILE NUMBER 0000000181417450						
1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer. attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13						
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement						
3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9. For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8						
4. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law						
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check one of these two boxes: This Change affects <input checked="" type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address. Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b						
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)						
OR 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S) INITIAL(S) SUFFIX						
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) [use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name]						
OR 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S) SUFFIX						
7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY						
8. <input checked="" type="checkbox"/> COLLATERAL CHANGE: Also check one of these four boxes: <input checked="" type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral: <b>Collateral</b>						
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor						
OR 9a. ORGANIZATION'S NAME Yoko 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S) INITIAL(S) SUFFIX						
10. OPTIONAL FILER REFERENCE DATA:						

(Rev. 04/20/11)

## 6.0 – UCC-3 ASSIGNMENT

### 6.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-3 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

The screenshot shows the 'Contact' form with several fields highlighted in red boxes. A box labeled 'Required Fields' has arrows pointing to the 'Send Acknowledgment To (Name)', 'Contact Email Address', 'Verify Contact Email Address', 'Address Line 1', 'City/Province/Region', 'State', 'Zip/Postal Code', and 'Country' fields. A box labeled 'Page Instructions' has an arrow pointing to the 'INSTRUCTIONS' dropdown menu. The form includes a 'CANCEL' button, 'BACK' and 'CONTINUE' buttons, and a 'Page Instructions' label.

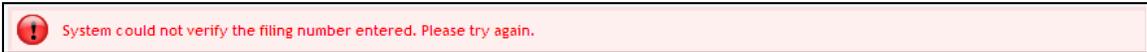
### 6.02 – FILING NUMBER LOOKUP

The user must indicate enter the filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filing Number** is a required field.

The screenshot shows the 'Assignment Request' form. The 'Filing Number' field is highlighted in a red box, with an arrow pointing to it from a box labeled 'REQUIRED FIELD'. Below the form, there is a checkbox for 'REAL ESTATE RECORDS' and a box labeled 'SELECT TO CONTINUE FILING' with an arrow pointing to the 'CONTINUE' button. The form includes a 'CANCEL' button, 'BACK' and 'CONTINUE' buttons, and a 'REQUIRED FIELD' label.

### CANNOT LOCATE FILING NUMBER

If the filing number entered cannot be located, the user will be provided a message that the filing number could not be located.



### 6.03 – ASSIGNMENT ACTION

Filers have the option to select an existing party to assign collateral, add new debtor(s) to assign collateral or amend the collateral statement.



The screenshot shows the "Assignment Selection" interface. At the top, it asks to verify information: Filing Number: 110311-0902453, Primary Secured Party: TEST ORGANIZATION SECURED PARTY, and Primary Secured Party Type: Organization. A red box highlights this information, with an arrow pointing to a "FILING SUMMARY" label. Below this is a table of secured parties. The first row shows "Organization" for "TEST ORGANIZATION SECURED PARTY" at "111 Nowhere Lane, COLUMBIA, MD 21045, Country: US". A red box highlights the "Action" column for this row, with an arrow pointing to an "ASSIGNMENT OPTIONS" label. Below the table is an "ADD ASSIGNEE" button. At the bottom, there are "CANCEL", "BACK", and "CONTINUE" buttons. A "SELECT TO CONTINUE FILING" label has an arrow pointing to the "CONTINUE" button.

SECURED PARTY(S)			
Secured Party Type	Secured Party Name	Address	Action
Organization	TEST ORGANIZATION SECURED PARTY	111 Nowhere Lane COLUMBIA, MD 21045 Country: US	

## 6.04 – COLLATERAL ASSIGNMENT

This page allows for the entry of a collateral assignment. The user selects the assignment type and provides the collateral that is being assigned. Information provided on this screen is the same information provided in Box 8 of the UCC-3 form and Box 13 of the UCC-3Ad form. Note that **Assignment Type** and **Please provide the collateral you are assigning** are required fields.

**Collateral** INSTRUCTIONS ▾

•Assignment Type  N/A  
 Full  
 Partial

**State Department of Assessments & Taxation is not responsible for the correctness or acceptability of listed collateral. Burden is on the Filer to ensure acceptable collateral is listed (tangible assets).**

•Please provide the collateral you are assigning

SELECT TO CONTINUE FILING

CANCEL BACK CONTINUE

## 6.05 – AUTHORIZING PARTY

Assignments must be authorized by a secured party or debtor. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 9 of the UCC-3 form.

**Authorizing Party**

Verify the following information is correct:

Filing Number: 110311-0902453  
Primary Secured Party: TEST ORGANIZATION SECURED PARTY  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered](#).

AUTHORIZING PARTY(S)		
#	Secured Party Type	Secured Party Name
<input type="checkbox"/>	Organization	TEST ORGANIZATION SECURED PARTY

SELECT TO CONTINUE FILING

CANCEL BACK CONTINUE

## 6.06 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

**Summary**

Your UCC Assignment Filing is not yet complete. Please review the information below for accuracy.

**CONTACT INFORMATION**

**EDIT CONTACT**

Send Acknowledgement To (Name): JOHN Q. FILER  
Contact Address: 111 Nowhere Lane  
COLUMBIA, MD 21045  
Country: US  
Contact Name:  
Contact Phone:  
Contact Phone Extension:  
Contact Email Address: test@yahoo.com

**FILING REQUEST INFORMATION**

**EDIT REQUEST**

Filer Is A: N/A  
Filing Number: 110311-0902453  
Primary Secured Party Type: Organization  
Primary Secured Party: TEST ORGANIZATION SECURED PARTY

**AUTHORIZING SECURED PARTY(S)**

**EDIT AUTHORIZING PARTY**

Secured Party Type: Secured Party Name  
Organization: TEST ORGANIZATION SECURED PARTY

**ASSIGNMENT PENDING ACTION(S)**

**EDIT ASSIGNMENT SELECTION(S)**

Secured Party Type: Secured Party Name  
Organization: TEST ORGANIZATION SECURED PARTY

Optional Filer Reference Data:

**ITEMS SELECTED FOR PURCHASE**

ITEM	# of Pages	PRICE
UCC Assignment Filing Fee	1	\$25.00
<b>Total Amount to be Charged:</b>		<b>\$25.00</b>

**Please Confirm**

I have verified that all of the above information is correct and complete.

VERIFICATION THAT FILING HAS BEEN REVIEWED & IS CORRECT

**CANCEL** **SELECT TO CONTINUE FILING** **BACK** **CONTINUE**

## 6.07 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Transaction Summary**

UCC-1 Filing Fee	\$20.00
<b>Transaction Summary</b>	<b>\$20.00</b>

**Need Help?**  
Please complete the Customer Information Section

## 6.08 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user will see a PAYMENT SUCCESSFUL screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.

**Payment Successful - Complete Transaction Below.**  
Documents are PDF files. [Get the Adobe Acrobat Reader here.](#)

Viewing or printing your documents is as easy as...

The diagram illustrates a two-step process. Step 1, highlighted in a teal box, involves clicking 'View/Print Documents' to view or print an acknowledgment copy. Step 2, highlighted in an orange box, involves clicking 'View/Print Receipt' to view or print a receipt. A green arrow points from Step 1 to Step 2. Below the steps are buttons for 'START ANOTHER FILING' and 'RETURN TO MAIN MENU'.

### SAMPLE RECEIPT

**Receipt**

[Print Receipt](#)

**TRANSACTION HISTORY**

Acknowledge Copy To	JOHN Q. FILER
Email Address	test@yahoo.com
Card Type	Visa *1111
Name on Card	JOHN Q. FILER
TPE Order ID Number	126232
File ID Number	110330-1249183
Filing Date/Time	3/30/2011 12:49 PM

Your bank statement will reflect that the charge was made by MARYLAND GOVPAY.

**ITEMS PURCHASED**

Item	Price
UCC Amendment Filing Fee	\$25.00
<b>Total Amount Charged</b>	<b>\$25.00</b>

[PRINT RECEIPT](#)

[BACK](#)

SAMPLE ACKNOWLEDGMENT COPY

	<b>UCC-3</b>				
<b>UCC FINANCING STATEMENT AMENDMENT</b>					
FOLLOW INSTRUCTIONS					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</td> </tr> <tr> <td style="padding: 2px;">B. E-MAIL CONTACT AT FILER (optional)</td> </tr> <tr> <td style="padding: 2px;">C. SEND ACKNOWLEDGMENT TO: (Name and Address)</td> </tr> <tr> <td style="padding: 2px;"> <input type="checkbox"/> Maurice Minor                  234 Winslow Gardens   <input type="checkbox"/> Annapolis, MD 21401             </td> </tr> </table>	A. NAME & PHONE OF CONTACT AT FILER (optional)	B. E-MAIL CONTACT AT FILER (optional)	C. SEND ACKNOWLEDGMENT TO: (Name and Address)	<input type="checkbox"/> Maurice Minor 234 Winslow Gardens  <input type="checkbox"/> Annapolis, MD 21401	MD DEPT. OF ASSESSMENTS & TAXATION 160316-1557025 NS Date: 3/16/2016 Time: 3:57 PM Page Count: 2 Pg Debtor Count: 0 Filing Fees: \$25.00 Electronic Records Access: \$0.00 Total: \$25.00 Order ID# 16161500
A. NAME & PHONE OF CONTACT AT FILER (optional)					
B. E-MAIL CONTACT AT FILER (optional)					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
<input type="checkbox"/> Maurice Minor 234 Winslow Gardens  <input type="checkbox"/> Annapolis, MD 21401					
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY					
1a. INITIAL FINANCING STATEMENT FILE NUMBER 0000000181417450	1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer. attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13				
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement					
3. <input checked="" type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9. For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8					
4. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law					
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check one of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address; Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b					
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)					
6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S) INITIAL(S) SUFFIX					
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) [use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name]					
7a. ORGANIZATION'S NAME PRINCIPIS CAPITAL LLC. OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S) SUFFIX					
7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY					
8. <input type="checkbox"/> COLLATERAL CHANGE: Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input checked="" type="checkbox"/> ASSIGN collateral Indicate collateral: <b>Collateral</b>					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor					
9a. ORGANIZATION'S NAME Issac OR 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S) INITIAL(S) SUFFIX					
10. OPTIONAL FILER REFERENCE DATA:					

(Rev. 04/20/11)

## 7.0 – UCC-3 CONTINUATION

This option is used to file a continuation to extend the lapse period for the filing. The UCC-3 can be filed within six months before the expiration of the five-year period. If a UCC-3 is not filed before the end of the five-year period, the financing statement lapses and the security interest becomes unperfected. A UCC-3 cannot be filed after the lapse date.

The UCC-3 Continuation filing is divided into several web pages. Each page allows for the entry of a specific type of information. Please do not place your social security number on a UCC filing or any other document you submit to the Maryland State Department of Assessments and Taxation. Although we attempt to prevent disclosure of social security numbers, we cannot guarantee that a social security number placed on a document will not be disclosed due to the large number of documents filed. It is the responsibility of the filer to ensure that a social security number is not contained on the filing. Please note that all information entered on the following screens will be displayed on copies of the filing. Filings may be viewed by the public and requested copies may also be made available.

### 7.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-3 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

The screenshot shows a web form titled "Contact". The form contains several input fields and dropdown menus. A red box highlights the following fields: "Send Acknowledgment To (Name)", "Contact Email Address", "Verify Contact Email Address", "Address Line 1", "City/Province/Region", "State", "Zip/Postal Code", and "Country". A blue box highlights the "INSTRUCTIONS" dropdown menu. A "Page Instructions" box points to the "INSTRUCTIONS" dropdown. A "Required Fields" box points to the red-highlighted fields. At the bottom of the form, there are three buttons: "CANCEL" (red), "BACK" (blue), and "CONTINUE" (blue).

### 7.02 – FILING NUMBER LOOKUP

The user must indicate whether they are a debtor or secured party making the filing and enter the filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filer Is A** and **Filing Number** are required fields.

**Continuation Request**

\*Filer Is A  Debtor  Secured Party

\*Filing Number

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

**REQUIRED FIELDS**

**SELECT TO CONTINUE FILING**

CANCEL BACK CONTINUE

### INELIGIBLE FOR CONTINUATION

If the filing number entered is ineligible for continuation because the original filing has lapsed or is not in the six month window of the filing lapsing, the user will be provided a message that the filing is not eligible to be continued.



### CANNOT LOCATE FILING NUMBER

If the filing number entered cannot be located, the user will be provided a message that the filing number could not be located.



## 7.03 – AUTHORIZING PARTY

Continuations must be authorized by a secured party or debtor. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 9 of the UCC-3 form.

**Authorizing Party**

Verify the following information is correct:

Filing Number: 960613-112033A  
Primary Secured Party: Sample Secured Party  
Primary Secured Party Type: Organization

**FILING SUMMARY INFORMATION**

If this information is not correct please [check the filing number entered](#).

#	Secured Party Type	Secured Party Name
<input type="checkbox"/>	Organization	Sample Secured Party

**AUTHORIZING PARTY(S)**

**SELECT 1 OR MORE AUTHORIZING PARTY(S)**

**SELECT TO CONTINUE FILING**

CANCEL BACK CONTINUE

## 7.04 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

**Summary**

Your UCC Continuation Filing is not yet complete. Please review the information below for accuracy.

**CONTACT INFORMATION**

**EDIT CONTACT**

Send Acknowledgement To (Name): TEST FILER

Contact Address: 111 Nowhere Lane  
COLUMBIA, MD 21045  
Country: US

Contact Name:

Contact Phone:

Contact Phone Extension:

Contact Email Address: test@yahoo.com

**FILING REQUEST INFORMATION**

**EDIT REQUEST**

Filer Is As: Secured Party

Filing Number: 960613-112031A

Primary Secured Party Type: Organization

Primary Secured Party: Sample Secured Party

**AUTHORIZING SECURED PARTY(S)**

**EDIT AUTHORIZING PARTY**

Secured Party Type: Secured Party Name

Organization: Sample Secured Party

Optional Filer Reference Data:

**ITEMS SELECTED FOR PURCHASE**

ITEM	# of Pages	PRICE
UCC Continuation Filing Fee	1	\$25.00
<b>Total Amount to be Charged:</b>		<b>\$25.00</b>

**Please Confirm**

I have verified that all of the above information is correct and complete.

VERIFICATION THAT FILING HAS BEEN REVIEWED & IS CORRECT

**CANCEL**      **SELECT TO CONTINUE FILING**      **BACK**      **CONTINUE**

## 7.05 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Payment**

Payment Type  [Edit](#)

**Credit Card**

Customer Information

Country Complete all required fields [ \* ]  
United States

First Name \*  Last Name \*

Address \*

Address 2

City \*  State \*

ZIP/Postal Code \*

Phone  Email \*

[Next >](#)

Payment Info

[Cancel](#)

**Transaction Summary**

UCC-1 Filing Fee	\$20.00
<b>Transaction Summary</b>	<b>\$20.00</b>

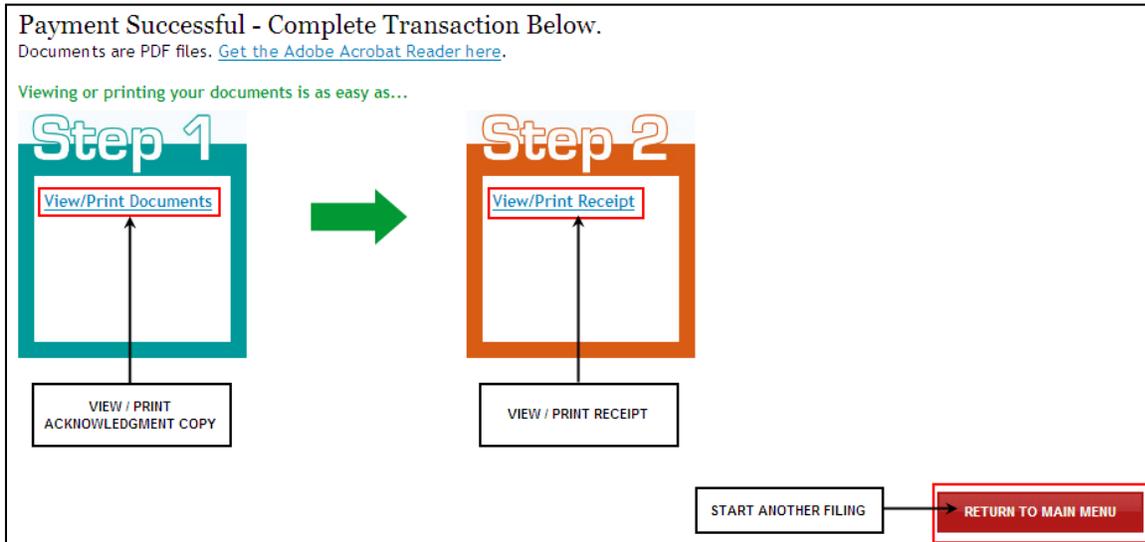
**Need Help?**  
Please complete the Customer Information Section

## 7.06 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user sees a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's Office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.



### SAMPLE RECEIPT

Receipt

TRANSACTION HISTORY	
Acknowledge Copy To	TEST FILER
Email Address	test@yahoo.com
Subscriber Account Name	Subscription Testing
Subscriber Account Number	100633
File ID Number	110330-1013327
Filing Date/Time	3/30/2011 10:13 AM

Your Subscriber account will reflect that the charge was made by MARYLAND GOVPAY.

ITEMS PURCHASED	
Item	Price
UCC Continuation Filing Fee	\$25.00
<b>Total Amount Charged</b>	<b>\$25.00</b>

[Print Receipt](#)  
PRINT RECEIPT

BACK

SAMPLE ACKNOWLEDGMENT COPY

	<b>UCC-3</b>	
<b>UCC FINANCING STATEMENT AMENDMENT</b>		MD DEPT. OF ASSESSMENTS & TAXATION 160316-1552417 NS Lapse Date: 04/01/2021 Date: 3/16/2016 Time: 3:52 PM Page Count: 1 Pg Debtor Count: 0 Filing Fees: \$25.00 Electronic Records Access: \$0.00 Total: \$25.00 Order ID# 16161480
FOLLOW INSTRUCTIONS		
A. NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address)		
Jane Saw 234 Winslow Gardens Annapolis, MD 21401		
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b>		
1a. INITIAL FINANCING STATEMENT FILE NUMBER 0000000181417450		1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer. attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement		
3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9. For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8		
4. <input checked="" type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law		
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check one of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address; Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b		
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)		
6a. ORGANIZATION'S NAME		
OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S) INITIAL(S) SUFFIX		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) [use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name]		
7a. ORGANIZATION'S NAME		
OR 7b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S) INITIAL(S) SUFFIX		
7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY		
8. <input type="checkbox"/> COLLATERAL CHANGE: Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor		
9a. ORGANIZATION'S NAME		
OR 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S) INITIAL(S) SUFFIX		
10. OPTIONAL FILER REFERENCE DATA:		

(Rev. 04/20/11)

## 8.0 – UCC-3 TERMINATION

### 8.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-3 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

The screenshot shows the 'Contact' form with the following fields and annotations:

- Send Acknowledgment To (Name)**: A text input field highlighted with a red box. An arrow labeled 'Required Fields' points to it.
- Contact Name**: A text input field.
- Contact Phone Number**: A text input field with a format mask ( ) \_ - \_.
- Contact Phone Extension**: A text input field.
- Contact Email Address**: A text input field highlighted with a red box. An arrow labeled 'Required Fields' points to it.
- Verify Contact Email Address**: A text input field highlighted with a red box. An arrow labeled 'Required Fields' points to it.
- Address Line 1**: A text input field highlighted with a red box. An arrow labeled 'Required Fields' points to it.
- Address Line 2**: A text input field.
- City/Province/Region**: A text input field highlighted with a red box. An arrow labeled 'Required Fields' points to it.
- State**: A dropdown menu with 'SELECT STATE' selected.
- Zip/Postal Code**: Two text input fields.
- Country**: A dropdown menu with 'United States' selected.
- INSTRUCTIONS**: A blue button with a dropdown arrow, highlighted with a red box. An arrow labeled 'Page Instructions' points to it.
- CANCEL**: A red button.
- BACK**: A blue button.
- CONTINUE**: A blue button.

### 8.02 – FILING NUMBER LOOKUP

The user must indicate whether they are a debtor or secured party making the filing and enter the Filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filer Is A** and **Filing Number** are required fields.

The screenshot shows the 'Termination Request' form with the following fields and annotations:

- Filer Is A**: A radio button group with 'Debtor' and 'Secured Party' options. The 'Filer Is A' label is highlighted with a red box. An arrow labeled 'REQUIRED FIELDS' points to it.
- Filing Number**: A text input field highlighted with a red box. An arrow labeled 'REQUIRED FIELDS' points to it.
- REAL ESTATE RECORDS**: A checkbox.
- SELECT TO CONTINUE FILING**: A button with an arrow pointing to the 'CONTINUE' button.
- CANCEL**: A red button.
- BACK**: A blue button.
- CONTINUE**: A blue button highlighted with a red box.

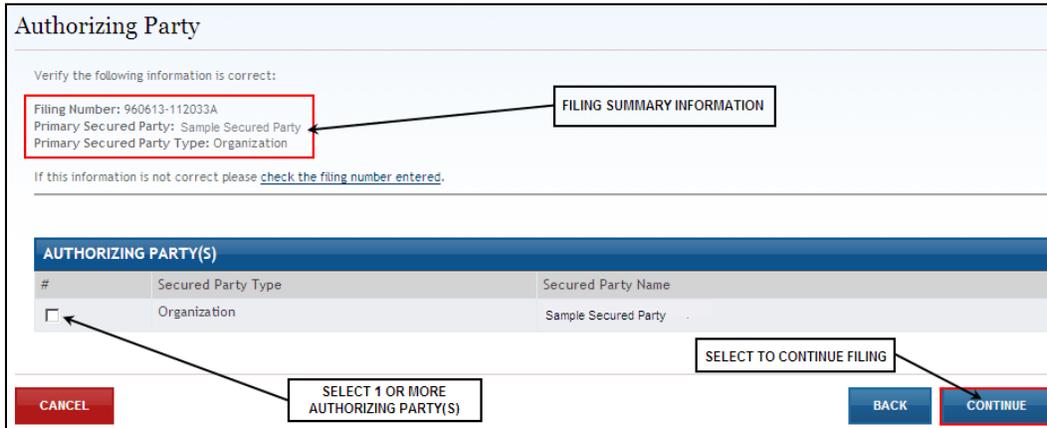
### CANNOT LOCATE FILING NUMBER

If the filing number entered cannot be located, the user will be provided a message that the filing number could not be located.



### 8.03 – AUTHORIZING PARTY

Terminations must be authorized by a secured party or debtor. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 9 of the UCC-3 form.



The screenshot shows the 'Authorizing Party' form. At the top, it says 'Verify the following information is correct:'. Below this, a red-bordered box contains the following text: 'Filing Number: 960613-112033A', 'Primary Secured Party: Sample Secured Party', and 'Primary Secured Party Type: Organization'. A callout box labeled 'FILING SUMMARY INFORMATION' points to this red-bordered box. Below the verification text, it says 'If this information is not correct please [check the filing number entered.](#)'. The main section is titled 'AUTHORIZING PARTY(S)' and contains a table with the following data:

#	Secured Party Type	Secured Party Name
<input type="checkbox"/>	Organization	Sample Secured Party

A callout box labeled 'SELECT 1 OR MORE AUTHORIZING PARTY(S)' points to the checkbox in the table. To the right of the table, there is a callout box labeled 'SELECT TO CONTINUE FILING' pointing to the 'CONTINUE' button. At the bottom left is a 'CANCEL' button, and at the bottom right are 'BACK' and 'CONTINUE' buttons.

## 8.04 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

**Summary**

Your UCC Termination Filing is not yet complete. Please review the information below for accuracy.

**CONTACT INFORMATION**

[EDIT CONTACT](#)

Send Acknowledgement To (Name): JOHN Q FILER

Contact Address: 111 Nowhere Lane  
Columbia, MD 21045  
Country: US

Contact Name:

Contact Phone:

Contact Phone Extension:

Contact Email Address: test@yahoo.com

**FILING REQUEST INFORMATION**

[EDIT FILING REQUEST](#)

Filer Is As: Secured Party

Filing Number: 960613-112033A

Primary Secured Party Type: Organization

Primary Secured Party: WACHOVIA BANK OF MD

**AUTHORIZING SECURED PARTY(S)**

[EDIT AUTHORIZING PARTY](#)

Secured Party Type	Secured Party Name
Organization	WACHOVIA BANK OF MD

Optional Filer Reference Data:

**ITEMS SELECTED FOR PURCHASE**

ITEM	# of Pages	PRICE
UCC Termination Filing Fee	1	\$25.00
<b>Total Amount to be Charged:</b>		<b>\$25.00</b>

**Please Confirm**

I have verified that all of the above information is correct and complete.

VERIFICATION THAT FILING HAS BEEN REVIEWED & IS CORRECT

[CANCEL](#) [SELECT TO CONTINUE FILING](#) [BACK](#) [CONTINUE](#)

## 8.05 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Transaction Summary**

UCC-1 Filing Fee	\$20.00
<b>Transaction Summary</b>	<b>\$20.00</b>

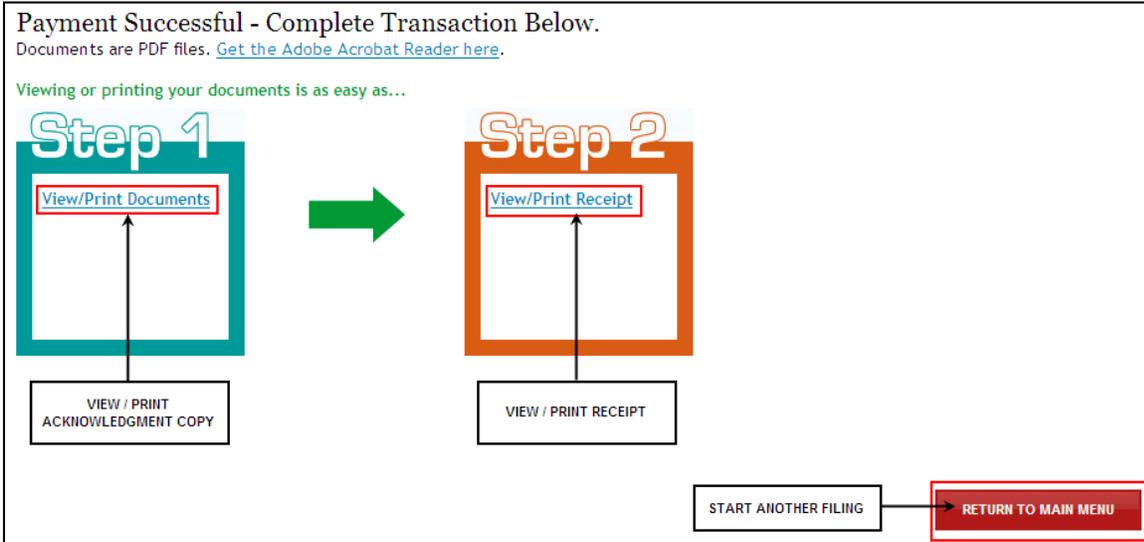
**Need Help?**  
Please complete the Customer Information Section

## 8.06 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user sees a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.



### Sample Receipt

**Receipt**

TRANSACTION HISTORY	
Acknowledge Copy To	TEST FILER
Email Address	test@yahoo.com
Subscriber Account Name	Subscription Testing
Subscriber Account Number	100633
File ID Number	110330-1013327
Filing Date/Time	3/30/2011 10:13 AM

Your Subscriber account will reflect that the charge was made by MARYLAND GOVPAY.

ITEMS PURCHASED	
Item	Price
UCC Continuation Filing Fee	\$25.00
<b>Total Amount Charged</b>	<b>\$25.00</b>

[Print Receipt](#)  
PRINT RECEIPT

BACK

SAMPLE ACKNOWLEDGMENT COPY

	<h1 style="margin: 0;">UCC-3</h1>														
<h2 style="margin: 0;">UCC FINANCING STATEMENT AMENDMENT</h2> <p style="margin: 0;">FOLLOW INSTRUCTIONS</p>															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</td> </tr> <tr> <td style="padding: 2px;">B. E-MAIL CONTACT AT FILER (optional)</td> </tr> <tr> <td style="padding: 2px;">C. SEND ACKNOWLEDGMENT TO: (Name and Address)</td> </tr> <tr> <td style="padding: 2px;"> <div style="border: 1px solid black; padding: 5px; margin: 5px;">                     Richard The Third 234 Winslow Gardens  Annapolis, MD 21401                 </div> </td> </tr> </table>	A. NAME & PHONE OF CONTACT AT FILER (optional)	B. E-MAIL CONTACT AT FILER (optional)	C. SEND ACKNOWLEDGMENT TO: (Name and Address)	<div style="border: 1px solid black; padding: 5px; margin: 5px;">                     Richard The Third 234 Winslow Gardens  Annapolis, MD 21401                 </div>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="font-size: small;">MD DEPT. OF ASSESSMENTS &amp; TAXATION</td> <td style="font-size: small;">160316-1548013 NS</td> </tr> <tr> <td style="font-size: small;">Date: 3/16/2016</td> <td style="font-size: small;">Time: 3:48 PM</td> </tr> <tr> <td style="font-size: small;">Page Count: 1 Pg</td> <td style="font-size: small;">Debtor Count: 0</td> </tr> <tr> <td style="font-size: small;">Filing Fees: \$25.00</td> <td style="font-size: small;">Electronic Records Access: \$0.00</td> </tr> <tr> <td style="font-size: small;">Total: \$25.00</td> <td style="font-size: small;">Order ID# 16161456</td> </tr> </table> <p style="text-align: center; font-size: small; margin-top: 5px;">THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</p>	MD DEPT. OF ASSESSMENTS & TAXATION	160316-1548013 NS	Date: 3/16/2016	Time: 3:48 PM	Page Count: 1 Pg	Debtor Count: 0	Filing Fees: \$25.00	Electronic Records Access: \$0.00	Total: \$25.00	Order ID# 16161456
A. NAME & PHONE OF CONTACT AT FILER (optional)															
B. E-MAIL CONTACT AT FILER (optional)															
C. SEND ACKNOWLEDGMENT TO: (Name and Address)															
<div style="border: 1px solid black; padding: 5px; margin: 5px;">                     Richard The Third 234 Winslow Gardens  Annapolis, MD 21401                 </div>															
MD DEPT. OF ASSESSMENTS & TAXATION	160316-1548013 NS														
Date: 3/16/2016	Time: 3:48 PM														
Page Count: 1 Pg	Debtor Count: 0														
Filing Fees: \$25.00	Electronic Records Access: \$0.00														
Total: \$25.00	Order ID# 16161456														
1a. INITIAL FINANCING STATEMENT FILE NUMBER 0000000181417450															
1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Filer. attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13															
2. <input checked="" type="checkbox"/> <b>TERMINATION:</b> Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement															
3. <input type="checkbox"/> <b>ASSIGNMENT</b> (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9. For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8															
4. <input type="checkbox"/> <b>CONTINUATION:</b> Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law															
5. <input type="checkbox"/> <b>PARTY INFORMATION CHANGE:</b> Check one of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address. Complete item 6a or 6b; and item 7a or 7b and item 7c. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b															
6. <b>CURRENT RECORD INFORMATION:</b> Complete for Party Information Change - provide only one name (6a or 6b)															
6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S) INITIAL(S) SUFFIX															
7. <b>CHANGED OR ADDED INFORMATION:</b> Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)															
7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S) SUFFIX															
7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY															
8. <input type="checkbox"/> <b>COLLATERAL CHANGE:</b> Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:															
9. <b>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:</b> Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input checked="" type="checkbox"/> and provide name of authorizing Debtor															
9a. ORGANIZATION'S NAME Gordon OR 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S) INITIAL(S) SUFFIX															
10. OPTIONAL FILER REFERENCE DATA:															

(Rev. 04/20/11)

## 9.0 – UCC-5, INFORMATION STATEMENT

### 9.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-1 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

The screenshot shows the 'Contact' form with the following fields and annotations:

- Send Acknowledgment To (Name)**: A text input field highlighted with a red box. An arrow points from a 'Required Fields' box to this field.
- Contact Name**: A text input field.
- Contact Phone Number**: A text input field with a format mask ( ) \_ - \_.
- Contact Phone Extension**: A text input field.
- Contact Email Address**: A text input field highlighted with a red box. An arrow points from a 'Required Fields' box to this field.
- Verify Contact Email Address**: A text input field highlighted with a red box. An arrow points from a 'Required Fields' box to this field.
- Address Line 1**: A text input field highlighted with a red box. An arrow points from a 'Required Fields' box to this field.
- Address Line 2**: A text input field.
- City/Province/Region**: A text input field highlighted with a red box. An arrow points from a 'Required Fields' box to this field.
- State**: A dropdown menu with 'SELECT STATE' highlighted with a red box. An arrow points from a 'Required Fields' box to this field.
- Zip/Postal Code**: Two text input fields.
- Country**: A dropdown menu with 'United States' selected.
- INSTRUCTIONS**: A blue button with a dropdown arrow, highlighted with a red box. An arrow points from a 'Page Instructions' box to this button.
- CANCEL**: A red button.
- BACK** and **CONTINUE**: Blue buttons.

### 9.02 – FILING NUMBER LOOKUP

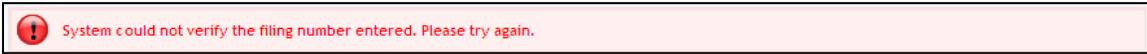
The user must indicate whether they are a debtor or secured party making the filing and enter the filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filer Is A** and **Filing Number** are required fields.

The screenshot shows the 'Filing Request' form with the following fields and annotations:

- Filer Is A**: A radio button group with 'Debtor' and 'Secured Party' options. The 'Filer Is A' label is highlighted with a red box. An arrow points from a 'REQUIRED FIELDS' box to this label.
- Filing Number**: A text input field highlighted with a red box. An arrow points from a 'REQUIRED FIELDS' box to this field.
- REAL ESTATE RECORDS**: A checkbox labeled 'REAL ESTATE RECORDS'.
- SELECT TO CONTINUE FILING**: A button highlighted with a red box. An arrow points from this button to a 'CONTINUE' button at the bottom right.
- CANCEL**: A red button.
- BACK** and **CONTINUE**: Blue buttons.

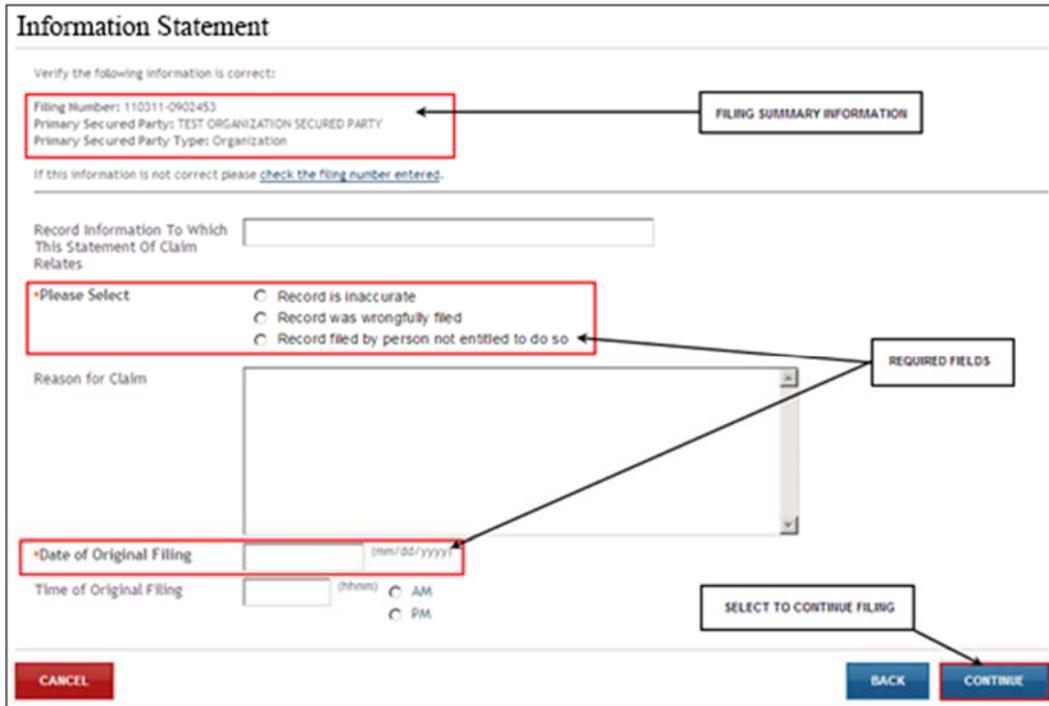
### CANNOT LOCATE FILING NUMBER

If the filing number entered cannot be located, the user will be provided a message that the filing number could not be located.



### 9.03 – INFORMATION STATEMENT

The user indicates on this page whether they believe the filing to be inaccurate or wrongly filed. Information provided on this screen is the same information provided in Boxes 1b, 2 and 3 of the UCC-5 form. Note that **Please Select** and **Date of Original Filing** are required fields.

The screenshot shows the 'Information Statement' form. At the top, it says 'Verify the following information is correct:'. Below this, a box contains the following text: 'Filing Number: 110311-0902453', 'Primary Secured Party: TEST ORGANIZATION SECURED PARTY', and 'Primary Secured Party Type: Organization'. An arrow points from a box labeled 'FILING SUMMARY INFORMATION' to this text. Below this, it says 'If this information is not correct please [check the filing number entered.](#)'. The next section is 'Record Information To Which This Statement Of Claim Relates'. Below this is a text input field. Then, there is a section labeled '\*Please Select' with three radio button options: 'Record is inaccurate', 'Record was wrongfully filed', and 'Record filed by person not entitled to do so'. An arrow points from a box labeled 'REQUIRED FIELDS' to this section. Below this is a large text area labeled 'Reason for Claim'. Then, there is a section labeled '\*Date of Original Filing' with a date input field (format: mm/dd/yyyy) and a 'Time of Original Filing' section with a time input field (format: hh:mm) and radio buttons for 'AM' and 'PM'. An arrow points from the 'REQUIRED FIELDS' box to the date input field. Below this is a button labeled 'SELECT TO CONTINUE FILING'. At the bottom left is a red 'CANCEL' button. At the bottom right are blue 'BACK' and 'CONTINUE' buttons.

## 9.04 – AUTHORIZING PARTY

Information Statement must be authorized by a party of record. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 5 of the UCC-5 form.

**Authorizing Party**

Verify the following information is correct:

**Filing Number:** 110311-0902453  
**Primary Secured Party:** TEST ORGANIZATION SECURED PARTY  
**Primary Secured Party Type:** Organization

If this information is not correct please [check the filing number entered.](#)

**FILING SUMMARY INFORMATION**

AUTHORIZING PARTY(S)		
#	Secured Party Type	Secured Party Name
<input type="checkbox"/>	Organization	TEST ORGANIZATION SECURED PARTY

**SELECT TO CONTINUE FILING**

**SELECT AUTHORIZING PARTY(S)**

**CANCEL** **BACK** **CONTINUE**

The screenshot shows a web interface for authorizing a party. At the top, a box titled 'Verify the following information is correct:' contains filing details. An arrow points from a 'FILING SUMMARY INFORMATION' box to this verification box. Below is a table with one row for 'Organization' and a checkbox. An arrow points from a 'SELECT AUTHORIZING PARTY(S)' box to the checkbox. To the right, a 'SELECT TO CONTINUE FILING' box has an arrow pointing to the 'CONTINUE' button. At the bottom, there are 'CANCEL', 'BACK', and 'CONTINUE' buttons.

## 9.05 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the State Department of Assessments and Taxation's Office. The user selects the **EDIT** button to change information previously entered.

**Summary**

Your Statement Of Claim Filing is not yet complete. Please review the information below for accuracy.

**CONTACT INFORMATION** EDIT CONTACT

Send Acknowledgment To (Name): TEST FILER

Contact Address: 111 Nowhere Lane  
Columbia, MD 21045  
Country: US

Contact Name:

Contact Phone:

Contact Phone Extension:

Contact Email Address: test@yahoo.com

**FILING REQUEST INFORMATION** EDIT REQUEST

Filer Is A: Secured Party

Filing Number: 110311-0902453

Primary Secured Party Type: Organization

Primary Secured Party: TEST ORGANIZATION SECURED PARTY

**AUTHORIZING SECURED PARTY(S)** EDIT AUTHORIZING PARTY

Secured Party Type	Secured Party Name
Organization	TEST ORGANIZATION SECURED PARTY

**STATEMENT OF CLAIM** EDIT STATEMENT OF CLAIM

Record Information To Which This Statement Of Claim Relates: Debtor Party

Record is Inaccurate: Debtor address was filed incorrectly. Debtor address is: 123 Nowhere Lane, Columbia, MD 21045

Date of Original Filing: 3/11/2011

Time of Original Filing: 0902 AM

Optional Filer Reference Data:

**ITEMS SELECTED FOR PURCHASE**

ITEM	# of Pages	PRICE
Statement Of Claim Filing Fee	1	\$25.00
<b>Total Amount to be Charged:</b>		<b>\$25.00</b>

**Please Confirm**

I have verified that all of the above information is correct and complete. VERIFICATION THAT FILING HAS BEEN REVIEWED AND IS CORRECT

**CANCEL** SELECT TO CONTINUE FILING **BACK** **CONTINUE**

## 9.06 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken to a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Payment**

Payment Type ✓ [Edit](#)

**Credit Card**

**Customer Information**

Country Complete all required fields [ \* ]  
United States

First Name \*  Last Name \*

Address \*

Address 2

City \*  State \*

ZIP/Postal Code \*

Phone  Email \*

[Next >](#)

**Payment Info**

[Cancel](#)

**Transaction Summary**

UCC-1 Filing Fee	\$20.00
<b>Transaction Summary</b>	<b>\$20.00</b>

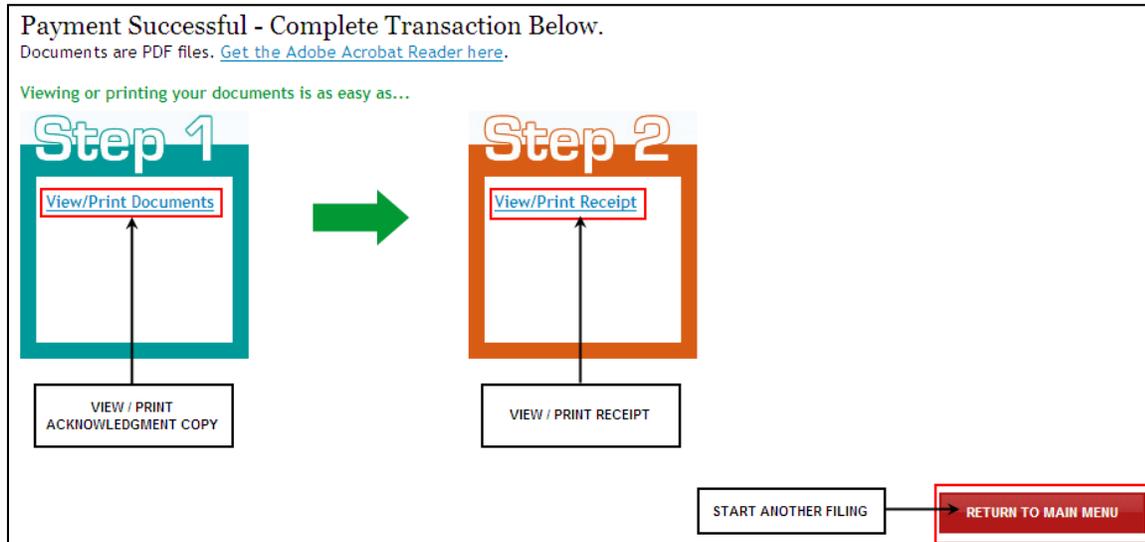
**Need Help?**  
Please complete the Customer Information Section

## 9.07 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user will see a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.



### Sample Receipt

The sample receipt screen displays the following information:

**TRANSACTION HISTORY**

Acknowledge Copy To	JOHN Q. FILER
Email Address	test@yahoo.com
Card Type	Visa *1111
Name on Card	JOHN Q. FILER
TPE Order ID Number	126232
File ID Number	110330-1249183
Filing Date/Time	3/30/2011 12:49 PM

Your bank statement will reflect that the charge was made by MARYLAND GOVPAY.

**ITEMS PURCHASED**

Item	Price
Information Statement Filing Fee	\$25.00
<b>Total Amount Charged</b>	<b>\$25.00</b>

Buttons for 'Print Receipt' and 'PRINT RECEIPT' are visible on the right side of the screen. A 'BACK' button is located at the bottom right.



SAMPLE ACKNOWLEDGMENT COPY

	<b>UCC-5</b>	
<b>INFORMATION STATEMENT</b>		MD DEPT. OF ASSESSMENTS & TAXATION 160316-1604034 NS
FOLLOW INSTRUCTIONS		Date: 3/16/2016 Time: 4:04 PM Page Count: 1 Pg Debtor Count: 0 Filing Fees: \$25.00 Electronic Records Access: \$0.00 Total: \$25.00 Order ID#: 16161542
A. NAME & PHONE OF CONTACT AT FILER (optional)		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
B. E-MAIL CONTACT AT FILER (optional)		
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">                     Horatio Hornblower                      234 Winslow Gardens                        Annapolis, MD 21401                 </div>		
1. Identification of the RECORD to which this INFORMATION STATEMENT relates		
1a. INITIAL FINANCING STATEMENT FILE NUMBER 0000000181417450	1b. RECORD INFORMATION TO WHICH THIS INFORMATION STATEMENT RELATES	
2. Check <u>one</u> of these three boxes to indicate the claim made by this INFORMATION STATEMENT		
2a. <input checked="" type="checkbox"/> RECORD IS INACCURATE. Enter in item 3 the basis for the belief by the Debtor of Record identified in item 5 that the RECORD identified in item 1 is inaccurate and indicate the manner in which the person believes the RECORD should be amended to cure the inaccuracy		
2b. <input type="checkbox"/> RECORD WAS WRONGFULLY FILED. Enter in item 3 the basis for the belief by the Debtor of Record identified in item 5 that the RECORD identified in item 1 was wrongfully filed		
2c. <input type="checkbox"/> RECORD FILED BY PERSON NOT ENTITLED TO DO SO. Enter in item 3 the basis for the belief by the Secured Party of Record that the person that filed the RECORD identified in item 1 was not entitled to do so under UCC Section 9-509		
3. Basis for claim of box checked in item 2 Wrong information		
4. If this INFORMATION STATEMENT relates to a RECORD filed [or recorded] in a filing office described in Section 9-501(a)(1) and this INFORMATION STATEMENT is filed in such a filing office, provide the date [and time] on which the INITIAL FINANCING STATEMENT identified in item 1a above was filed [or recorded]		
4a. DATE 3/1/2015	4b. TIME	
5. NAME of PERSON filing this INFORMATION STATEMENT		
5a. ORGANIZATION'S NAME Humpty		
OR 5b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
(Rev. 07/19/12)		

SAMPLE

## 10.0 –SEARCH BY NAME

Searches are used to find initial financing statements, amendments, correction statements and lien statements for debtors. One of the key components to keep in mind while searching is the “through date.” The through date and time is “real time” – your search results will contain data meeting the criteria up to the date and time the search is submitted. The search results you receive will clearly display the through date.

### SEARCH LOGIC

Search results are created by applying search rules to the name presented for searching.

- There is no limit to the number of matches that may be returned in response to the search criteria.
- No distinction is made between upper and lower case letters.
- Punctuation marks and accents are disregarded.
- All spaces are disregarded.
- Searches for individuals should be entered as Last Name First Name Middle Name or Initial (i.e., Doe John)
- If a first name is provided, a match will be found on that with any middle name.
- If only an initial is provided for the first name, a match will be found on any first name starting with the same letter.
- If a middle name is provided for the middle name, a match will be found on the middle name.
- If only an initial is given for the middle name, a match will be found on any middle name starting with the same letter.

Examples are as follows:

A search for **Bank of America** will retrieve:

- Bank of America Home Loans
- Bank of America Corporate Center
- Bank of America N.A.

A search request for **Smith John A.** will retrieve:

- John A. Smith
- John Alexander Smith
- John Adam Smith

A search request for **Smith John** will retrieve:

- John Smith
- John A. Smith
- Johnnie Smith
- John Robert Smith

A search request for **Smith J M** will retrieve:

- John M. Smith
- John Michael Smith

- Johnnie Smith
- John Matthew Smith

Because search results are produced by applying standard RA9 search logic to the name presented to the filing officer, this provides consistent, reliable results and ensures that human judgment does not play a role in determining the results of the search.

Per RA9 Standards Section 503, jurisdictions perform UCC lien searches using the following logic:

There is no limit to the number of matches that may be returned in response to the search criteria.

- No distinction is made between upper and lower case letters.
- The character "&" (the ampersand) is deleted and replaced with the characters "and" each place it appears in the name.
- Punctuation marks and accents are disregarded. For purposes of this rule, punctuation and accents include all characters other than the numerals 0 through 9 and the letters A through Z (in any case) of the English alphabet.
- Words and abbreviations at the end of an organization name that indicate the existence or nature of the organization are "disregarded" as determined by the filing office's programming of its UCC information management system.
- The word "the" at the beginning of an organization debtor name is disregarded.
- All spaces are disregarded.
- For first and middle names of individual debtor names, initials are treated as the logical equivalent of all names that begin with such initials, and first name and no middle name or initial is equated with all middle names and initials. For example, a search request for "John A. Smith" would cause the search to retrieve all filings against all individual debtors with "John" or the initial "J" as the first name, "Smith" as the last name, and with the initial "A" or any name beginning with "A" in the middle name field. If the search request were for "John Smith" (first and last names with no designation in the middle name field), the search would retrieve all filings against individual debtors with "John" or the initial J as the first name, "Smith" as the last name and with any name or initial or no name or initial in the middle name field.
- If the name being searched is the last name of an individual debtor name without any first or middle name provided, the search will retrieve from the UCC information management system all unlapsed records or, if requested by the searcher, all active records that pertain to financing statements with individual debtor names that consist of such last name, any or no middle name or initial and no first name.
- After using the preceding rules to modify the name being searched, the search will retrieve from the UCC information management system all unlapsed records, or, if requested by the searcher, all active records that pertain to financing statements with debtor names that, after being modified as provided in this rule, exactly match the modified name being searched.

NOISE WORDS

AGENCY	LTD	PROFESSIONAL LIMITED LIABILITY
ASSOCIATION	LTEE	CO
ASSN	LIMITED LIABILITY COMPANY	PLLC
ASSOCIATES	LC	RAILROAD
ASSC	LLC	RR
ASSOC	LIMITED LIABILITY PARTNERSHIP	REAL ESTATE INVESTMENT TRUST
ATTORNEYS AT LAW	LLP	REIT
BANK	LIMITED PARTNERSHIP	REGISTERED LIMITED LIABILITY
NATIONAL BANK	LP	PARTNERSHIP
BUSINESS TRUST	MEDICAL DOCTORS PROFESSIONAL	RLLP
CHARTER	ASSOCIATION	SAVINGS ASSOCIATION
CHARTERED	MDPA	SA
COMPANY	MEDICAL DOCTORS PROFESSIONAL	SERVICE CORPORATION
CO	CORPORATION	SC
CORPORATION	MDPC	SOLE PROPRIETORSHIP
CORP	NATIONAL ASSOCIATION	SP
CREDIT UNION	NA	SPA
CU	PARTNERS	TRUST
FEDERAL SAVINGS BANK	PARTNERSHIP	TRUSTEE
FSB	PROFESSIONAL ASSOCIATION	AS TRUSTEE
GENERAL PARTNERSHIP	PROF ASSN	LLL
GENPART	PA	LIMITED LIABILITY LIMITED
GP	PROFESSIONAL CORPORATION	PARTNERSHIP
INCORPORATED	PROF CORP	OD
INC	PC	PROFESSIONAL LIMITED LIABILITY
LIMITED		COMPANY

10.01 – SEARCH CRITERIA

The Search by Name option allows the user to look up and view information by debtor or secured party name.

The responsibility for accurately searching names rests with the user. Search results are determined by the search criteria you choose. Therefore, if you do not see the results you expect, check the spelling of the information entered and/or choose different search criteria.

**Name Search** INSTRUCTIONS ▾

Party  Debtor 1  
 Secured Party

Party Name

Please enter a name using Last Name, First Name. (Example: Smith, John)  
 Or you may search by an organization name. (Example: B & B Toys)

Filing Status  All Filings (Lapsed and Unlapsed) 2  
 Only Unlapsed Filings

Filing Type  All 3  
 UCC-1 Only

SEARCH CRITERIA  
SEARCH FILTERS  
SELECT TO PROCESS SEARCH

CANCEL

BACK SEARCH

PARTY SEARCH FILTER (1)

This option is used to allow the user to indicate if the party name being searched is a debtor or secured party. "Debtor" is selected by default.

#### PARTY NAME

The user provides the party name they wish to search.

When searching for an individual, the user should enter the last name and then a first name or initial and optionally a middle name or initial. (Examples: Adams, John Q. or Adams, J Q or Adams, John Quincy)

When searching for an organization, the user should enter the name of the organization. (Examples: B and B Toys or B and B Toys)

#### FILING STATUS FILTER (2)

This option is used to allow the user to indicate if the search results should contain both active and lapsed filings or only active filings which are unlapsed. "All Filings (Lapsed and Unlapsed)" is selected by default.

#### FILING TYPE (3)

This option is used to allow the user to indicate if the search results should contain only initial financing statements (UCC-1) on record for the party name or all filings on record for the party name. "All" is selected by default.

## 10.02 – SEARCH RESULTS

If the search results include one or more matches, the application will display all matching party names on file for the search. The user has the option to select one or more matching names from the returned results.

The screenshot displays a search results interface titled "Name Search Result(s)". It features a table with a header "NAME" and five rows of test data. Each row has a checkbox in the left margin. A red box highlights the checkboxes, and an arrow points from a callout box to the third checkbox. Below the table are four buttons: "CANCEL", "Select 1 or more party name matches", "Select to view associated filings", and "RETRIEVE FILINGS". A "BACK" button is also present between the "Select to view associated filings" and "RETRIEVE FILINGS" buttons.

	NAME
<input type="checkbox"/>	TEST, DEBTOR ORGANIZATION LLP
<input type="checkbox"/>	TEST DEBTOR ORGANIZATION
<input type="checkbox"/>	TEST DEBTOR ORGANIZATION, LLP
<input type="checkbox"/>	TEST DEBTOR ORGANIZATION LLC
<input type="checkbox"/>	TEST DEBTOR ORGANIZATION, LLC

If no matches are located, the user will be informed that no documents are on file that meet the search criteria.

**Search Result(s)**

 No Party Name(s) matched your searched criteria.

Searched Details:-  
Name Type: Organization  
Party: Debtor  
Search Type: Non Standard Search  
Organization Name: ← Search criteria submitted  
Individual Last Name:  
Individual First Name:  
Individual Middle Name:  
Filing Status: All Filings (Lapsed & Unlapsed)  
Filing Type: All

"No Results Found" Document Request     Non-Certified Search Response     Certified Search Response ← No results found document request

**CANCEL**    Continue search request    **BACK**    **CONTINUE**

### 10.03 – SELECT FILINGS FOR RETRIEVAL

If the search results included a debtor match, the user will be provided with records on file that match the search criteria used.

All UCC-1 filings and, if applicable, their UCC-3 and/or UCC-5 associated filings will display. The user has the option to request a search response only, copies of one or more documents only or both a search response and copies of documents.

**Search Result(s)**

**SELECT FILINGS FOR RETRIEVAL**

<input type="checkbox"/> 1	Filing Number	Filing Type	Filing Date	Lapse Date
<input type="checkbox"/>	101211-1630581	UCC-1 Financing Statement (Transmitting Utility)	12/11/2010 4:26:51 PM	N/A
No associated filing(s) found.				
<input type="checkbox"/>	101214-0729024	UCC-1 Financing Statement: In Lieu of Continuatio	12/14/2010 7:24:52 AM	12/14/2015
No associated filing(s) found.				
<input type="checkbox"/> 2	110311-0902453	UCC-1 Financing Statement	3/11/2011 9:01:53 AM	3/11/2016

**ASSOCIATED FILINGS**

<input type="checkbox"/>	Filing Number	Filing Type	Filing Date
<input type="checkbox"/>	110330-1249183	UCC-3 Amendment	3/30/2011 12:49:18 PM
<input type="checkbox"/>	110401-0842404	UCC-3 Assignment	4/1/2011 8:42:40 AM
<input type="checkbox"/>	110407-0918092	UCC-3 Termination	4/7/2011 9:18:09 AM

<input type="checkbox"/> 2	110323-0828490	UCC-1 Financing Statement: In Lieu of Continuatio	3/23/2011 8:28:49 AM	3/23/2016
No associated filing(s) found.				

Select all documents (1) or select individual documents (2)

**Total documents found: 7**

**Certified Document Request**

I want certified copies of the selected filings above

I want a certified search response

Certified search response and document request

Number of documents on file

**Information Options**

Search Response and Copies  
Report of all filings associated with your search and copies of the filing.

Search Response Only  
Report of all filings associated with your search.

Selected Copies Only  
Copies of the selected filing(s) only.

Select to request search response, documents or

CANCEL Continue search request BACK CONTINUE

## 10.04 – ORDER SUMMARY AND CONTACT INFORMATION

The user has an opportunity to review and check the search request before submitting the request to the Maryland State Department of Assessments and Taxation’s Office. The user must also provide their contact information and verify that the request information is correct. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, and **Verify Contact Email Address** are all required fields.

**Summary**

Your UCC Search Filing is not yet complete. Please review the information below for accuracy.

ITEMS SELECTED FOR PURCHASE				
File ID	Filing Type	Filing Date	# of Pages	Price
110311-0902453	UCC-1 Financing Statement	3/11/2011	25	\$25.00
110330-1249183	UCC-3 Amendment	3/30/2011	1	\$1.00
101211-1630581	UCC-1 Financing Statement (Transmitting Utility)	12/11/2010	6	\$6.00
UCC Search Filing Fee				\$5.00
Certified Search Response Report				\$2.00
Certification Fee - Number of Documents: 3				\$6.00
<b>Total Amount to be Charged</b>				<b>\$45.00</b>

**\*Send Acknowledgement To (Name)**

Contact Name

Contact Phone Number

Contact Phone Extension

**\*Contact Email Address**

**\*Verify Contact Email Address**

**Please Confirm**

\*I have verified that all of the above information is correct and complete.

Verification that search request has been reviewed and is accurate

## 10.05 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken to a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Payment**

Payment Type ✓ [Edit](#)

**Credit Card**

**Customer Information**

Country Complete all required fields [ \* ]  
United States

First Name \*  Last Name \*

Address \*

Address 2

City \*  State \*

ZIP/Postal Code \*

Phone  Email \*

[Next >](#)

**Payment Info**

[Cancel](#)

**Transaction Summary**

UCC-1 Filing Fee	\$20.00
<b>Transaction Summary</b>	<b>\$20.00</b>

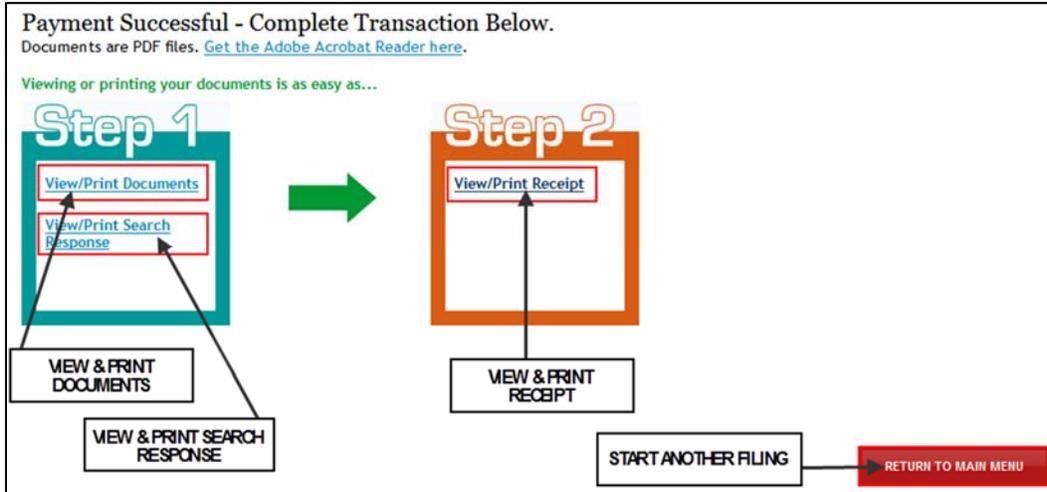
**Need Help?**  
Please complete the Customer Information Section

## 10.06 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user will see a Payment Successful screen. The user will be able to view/print/save the search response and any requested document(s) as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the search response and document(s).



Sample Receipt

Receipt

[Print](#)

**PRINT RECEIPT**

TRANSACTION HISTORY	
File ID Number	110426-0820429
Acknowledge Copy To	TEST FILER
Email Address	test@yahoo.com
Card Type	Visa *1111
Name on Card	TEST FILER
TPE Order ID Number	136048
Filing Date/Time	4/26/2011 8:20 AM
# of Documents	3
# of Pages	32
Searched Criteria	TEST DEBT

 Your bank statement will reflect that the charge was made by MARYLAND GOVPAY.

ITEMS PURCHASED				
File ID	Filing Type	Filing Date	# of Pages	Price
101211-1630581	UCC-1 Financing Statement (Transmitting Utility)	12/11/2010	6	\$6.00
110311-0902453	UCC-1 Financing Statement	3/11/2011	25	\$25.00
110330-1249183	UCC-3 Amendment	3/30/2011	1	\$1.00
UCC Search Filing Fee				\$5.00
Certified Search Response Report				\$2.00
Certification Fee - Number of Documents: 3				\$6.00
<b>Total Amount Charged</b>				<b>\$45.00</b>

[BACK](#)

## 11.0 –SEARCH BY FILING NUMBER

Each filing related to the Uniform Commercial Code or a lien of record is given a filing number to be indexed and searchable. Filing numbers have evolved through various formats over the years. Effective July 1, 2001, Revised Article 9 changed the formats of filing numbers to be consistent nationwide; however, the filing numbers existing prior to that time were not updated to this format, so searchers need to be aware that filing numbers in older formats will exist as long as they remain on the system.

### 11.01 – SEARCH CRITERIA

The Search by Number option allows the user to look up and view information by any UCC-1 or UCC-3 filing number. A search for a UCC-1 filing will also display any associated records. A search for a UCC-3 filing will display the associated UCC-1 record and any additional UCC-3 or UCC-5 filings.

Enter up to six filing numbers below, each with a maximum of fourteen (14) digits.

**Filing Search**

<input type="text"/>	UCC-1	<input type="text"/>	UCC-1
<input type="text"/>	UCC-1	<input type="text"/>	UCC-1
<input type="text"/>	UCC-1	<input type="text"/>	UCC-1

ENTER UP TO SIX FILING NUMBERS AND FILING TYPES

SELECT TO PROCESS SEARCH

CANCEL      BACK      SEARCH

## 11.02 – SEARCH RESULTS AND SELECT FILINGS FOR RETRIEVAL

If the search result includes at least one match, the application will display all matching documents on file for the search. The user has the option to select one or more matching names from the returned results. All UCC-1 filings and, if applicable, their UCC-3 and/or UCC-5 associated filings will display. The user has the option to request a search response only, copies of one or more documents only, or both a search response and copies of documents.

**Search Result(s)**

**SELECT FILINGS FOR RETRIEVAL**

<input type="checkbox"/> 1	Filing Number	Filing Type	Filing Date	Lapse Date
<input type="checkbox"/>	101211-1630581	UCC-1 Financing Statement (Transmitting Utility)	12/11/2010 4:26:51 PM	N/A
No associated filing(s) found.				
<input type="checkbox"/>	101214-0729024	UCC-1 Financing Statement: In Lieu of Continuatio	12/14/2010 7:24:52 AM	12/14/2015
No associated filing(s) found.				
<input type="checkbox"/> 2	110311-0902453	UCC-1 Financing Statement	3/11/2011 9:01:53 AM	3/11/2016

**ASSOCIATED FILINGS**

<input type="checkbox"/>	Filing Number	Filing Type	Filing Date
<input type="checkbox"/>	110330-1249183	UCC-3 Amendment	3/30/2011 12:49:18 PM
<input type="checkbox"/>	110401-0842404	UCC-3 Assignment	4/1/2011 8:42:40 AM
<input type="checkbox"/>	110407-0918092	UCC-3 Termination	4/7/2011 9:18:09 AM

<input type="checkbox"/> 2	110323-0828490	UCC-1 Financing Statement: In Lieu of Continuatio	3/23/2011 8:28:49 AM	3/23/2016
No associated filing(s) found.				

Select all documents (1) or select individual documents (2)

**Total documents found: 7**

**Certified Document Request**

I want certified copies of the selected filings above

I want a certified search response

**Information Options**

Search Response and Copies  
Report of all filings associated with your search and copies of the filing.

Search Response Only  
Report of all filings associated with your search.

Selected Copies Only  
Copies of the selected filing(s) only.

CANCEL Continue search request BACK CONTINUE

If no matches are located, the user will be informed that no documents are on file that meet the search criteria.

**Search Result(s)**

**No UCC Filings matched your searched criteria.**

Filing Number 123 returned no record(s). To order an official Search Response, select a document below.

“No Results Found” Document Request  Non-Certified Search Response  Certified Search Response

CANCEL SELECT TO REQUEST SEARCH RESPONSE BACK CONTINUE

### 11.03 – ORDER SUMMARY AND CONTACT INFORMATION

The user has an opportunity to review and check the search request before submitting the request to the Maryland State Department of Assessments and Taxation’s Office. The user must also provide their contact information and verify that the request information is correct. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, and **Verify Contact Email Address** are all required fields.

**Summary**

Your UCC Search Filing is not yet complete. Please review the information below for accuracy.

ITEMS SELECTED FOR PURCHASE				
File ID	Filing Type	Filing Date	# of Pages	Price
110311-0902453	UCC-1 Financing Statement	3/11/2011	25	\$25.00
110330-1249183	UCC-3 Amendment	3/30/2011	1	\$1.00
101211-1630581	UCC-1 Financing Statement (Transmitting Utility)	12/11/2010	6	\$6.00
UCC Search Filing Fee				\$5.00
Certified Search Response Report				\$2.00
Certification Fee - Number of Documents: 3				\$6.00
<b>Total Amount to be Charged</b>				<b>\$45.00</b>

\*Send Acknowledgement To (Name)

Contact Name

Contact Phone Number

Contact Phone Extension

\*Contact Email Address

\*Verify Contact Email Address

**Please Confirm**

\*I have verified that all of the above information is correct and complete.

Verification that search request has been reviewed and is accurate

CANCEL  BACK CONTINUE

## 11.04 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken to a payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Payment**

1 Payment Type 2 Customer Info 3 Payment Info 4 Submit Payment

Payment Type ✓ [Edit](#)

**Credit Card**

Customer Information

Country Complete all required fields [ \* ]  
United States

First Name \* Last Name \*

Address \*

Address 2

City \* State \*  
 Select State

ZIP/Postal Code \*

Phone Email \* 📧

[Next >](#)

Payment Info

[Cancel](#)

**Transaction Summary**

UCC-1 Filing Fee	\$20.00
<b>Transaction Summary</b>	<b>\$20.00</b>

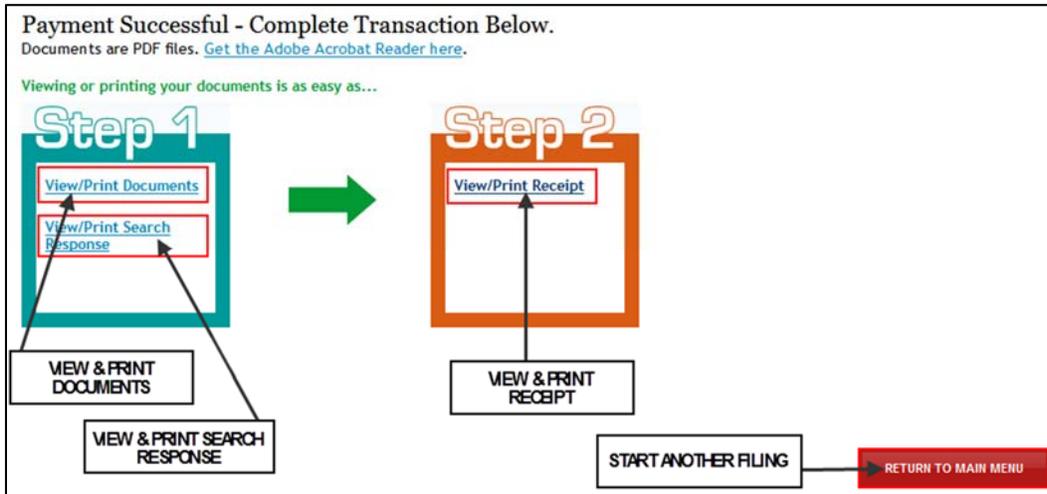
**Need Help?**  
Please complete the Customer Information Section

## 11.05 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user sees a Payment Successful screen. The user will be able to view/print/save the search response and any requested document(s) as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the search response and document(s).



SAMPLE RECEIPT

Receipt

[Print](#)

**PRINT RECEIPT**

TRANSACTION HISTORY	
File ID Number	110426-0820429
Acknowledge Copy To	TEST FILER
Email Address	test@yahoo.com
Card Type	Visa *1111
Name on Card	TEST FILER
TPE Order ID Number	136048
Filing Date/Time	4/26/2011 8:20 AM
# of Documents	3
# of Pages	32
Searched Criteria	TEST DEBT

 Your bank statement will reflect that the charge was made by MARYLAND GOVPAY.

ITEMS PURCHASED				
File ID	Filing Type	Filing Date	# of Pages	Price
101211-1630581	UCC-1 Financing Statement (Transmitting Utility)	12/11/2010	6	\$6.00
110311-0902453	UCC-1 Financing Statement	3/11/2011	25	\$25.00
110330-1249183	UCC-3 Amendment	3/30/2011	1	\$1.00
UCC Search Filing Fee				\$5.00
Certified Search Response Report				\$2.00
Certification Fee - Number of Documents: 3				\$6.00
<b>Total Amount Charged</b>				<b>\$45.00</b>

[BACK](#)

SAMPLE CERTIFIED DOCUMENT

**UCC-1**

**UCC FINANCING STATEMENT**  
FOLLOW INSTRUCTIONS

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

**B. E-MAIL CONTACT AT FILER (optional)**

**C. SEND ACKNOWLEDGMENT TO: (Name and Address)**

Mr. Spock  
234 Winslow Gardens  
  
Annapolis, MD 21401

CERTIFICATION

MD DEPT. OF ASSESSMENTS & TAXATION  
 160316-1608298 NS  
 Lapse Date: 03/16/2021  
 Date: 3/16/2016  
 Time: 4:08 PM  
 Page Count: 1 Pg  
 Debtor Count: 1  
 Filing Fees: \$25.00  
 Electronic Records Access: \$0.00  
 Total: \$25.00  
 Order ID# 16161562

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

---

**1. DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

<b>1a. ORGANIZATION'S NAME</b>			
<b>OR</b>	<b>1b. INDIVIDUAL'S SURNAME</b>	<b>FIRST PERSONAL NAME</b>	<b>ADDITIONAL NAME(S) (INITIAL(S))</b>
	Kirk	James	Tiberius
<b>1c. MAILING ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>POSTAL CODE</b>
2345 Enterprise Drive	Starfleet	MD	21401
			<b>COUNTRY</b>
			US

---

**2. DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

<b>2a. ORGANIZATION'S NAME</b>			
<b>OR</b>	<b>2b. INDIVIDUAL'S SURNAME</b>	<b>FIRST PERSONAL NAME</b>	<b>ADDITIONAL NAME(S) (INITIAL(S))</b>
<b>2c. MAILING ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>POSTAL CODE</b>
			<b>COUNTRY</b>

---

**3. SECURED PARTY'S NAME (or NAME OF ASSIGNEE OF ASSIGNOR SECURED PARTY):** Provide only one Secured Party name (3a or 3b)

<b>3a. ORGANIZATION'S NAME</b>	Starfleet		
<b>OR</b>	<b>3b. INDIVIDUAL'S SURNAME</b>	<b>FIRST PERSONAL NAME</b>	<b>ADDITIONAL NAME(S) (INITIAL(S))</b>
<b>3c. MAILING ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>POSTAL CODE</b>
234 Winslow Gardens	Annapolis	MD	21401
			<b>COUNTRY</b>
			US

---

**4. COLLATERAL:** This financing statement covers the following collateral:  
Collateral

---

**5.** Check only if applicable and check only one box. Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

**6a.** Check only if applicable and check only one box:  Public Finance Transaction  Manufactured Home Transaction  A Debtor is a Transmitting Utility

**6b.** Check only if applicable and check only one box:  Agricultural Lien  Non-UCC Filing

**7. ALTERNATIVE DESIGNATION (if applicable):**  Lessor/Lessor  Consignor/Consignor  Seller/Buyer  Bailor/Bailor  Licensee/Licensee

**8. OPTIONAL FILER REFERENCE DATA:**

(Rev. 04/20/11)

SAMPLE SEARCH RESPONSE

**Maryland Department of Assessments and Taxation Business Services**

Search Response

Dated: 3/17/2016 10:05 AM

Search Criteria Entered:

Filing Number Search

Filing Number1 (UCC1): 160316-1608298

Filing Number2 (UCC3): 160316-1552417

Filing Number3 (UCC3): 160316-1600121

Filing Number4 (UCC3): 160316-1548013

Filing Number5 (UCC3): 160316-1557025

Filing Number6 (UCC1):



Filing Number	Filing Type	Filing Date	Lapse Date	Electronic Image Available
160316-1608298	UCC-1 Financing Statement	3/16/2016 4:08 P M	3/16/2021	Yes
000000181417450	UCC-1 Financing Statement	4/1/2011 10:48 A M	4/1/2021	Yes
160316-1604034	UCC-6 Information Statement	3/16/2016 4:04 P M	N/A	Yes
160316-1600121	UCC-3 Amendment	3/16/2016 4:00 P M	N/A	Yes
160316-1557025	UCC-3 Assignment	3/16/2016 3:57 P M	N/A	Yes
160316-1552417	UCC-3 Continuation	3/16/2016 3:52 P M	N/A	Yes
160316-1548013	UCC-3 Termination	3/16/2016 3:48 P M	N/A	Yes
160304-1413379	UCC-3 Termination	3/4/2016 2:13 P M	N/A	Yes

## APPENDIX A – INFORMATION YOU SHOULD KNOW

PDF Files: Acknowledgment copies, search responses and documents will be presented to the user as hyperlinks. The hyperlink will open a PDF file. The user then has the opportunity to print and/or save the file. When saving the file, be sure to include the “.pdf” extension on the file name.

“Back” Button on Browser: We suggest that the user utilize the “Back” button provided within the application rather than the Back button on the web browser.

Entering Data: Data entry is case sensitive. Therefore, the format used in keying information into the application is how the information will be stored.

Collateral Field: If a long collateral description is desired, the user first should type that description in a word processing program (i.e., Word or WordPerfect) or a text editor (i.e., Notepad or Wordpad). That description can then be copied and pasted into the collateral field.

Browser Auto Complete: Many web browsers have a feature called “Auto Complete” which is turned on by default. Auto Complete stores information you have previously entered and will provide you with a drop-down box from which you can select an item. If you wish to have this feature turned off, consult with your IT help desk.

Navigating Through the Screens: All of the screens have a tab order set within them so the user can simply “Tab” through each field. The user can also use the mouse to click into specific fields.

Radio Buttons: The radio buttons displayed in the application are part of the tab order for that screen. To change a selection from one radio button to another, use the arrow keys on the keyboard.

Check Boxes: To place a check mark in a check box on any given screen, the user simply needs to tab into that field and hit the spacebar on the keyboard.

### UCC Online Filing Fees:

#### **UCC-1, UCC-3, UCC-5 and In Lieu of Continuation Fees**

Pages 1 - 8	\$ 25.00
Pages 9 and beyond	\$ 75.00

#### **Printing Fees (for certified copies only)**

Certification Fee (per document)	\$ 6.00
Each Page	\$ 1.00