This STATEMENT is presented to THE FILING OFFICER for filing pursuant to the Uniform Commercial Code:

Debtor(s) (Last Name First) and address(es)	Secured Party(ies) and address(es)	For Filing Officer (Date, Time, Number, and Filing Office)
Jones, Christian R. RFD 1, CA-1, Box 16 Delhi, IA, USA 52223	HERITAGE BANK 311 Franklin St. Delhi, IA 52223	1999 SEP 15 AM 11:41 DELAWARE COUNTY IOWA RECORDER T-58 N/C 388

This Statement refers to original Financing Statement No. G 12717

Date filed: July 25, 1996 Filed with Del Co Recorder

A. ☐ **CONTINUATION**..... The original financing statement bearing the file number shown above, is still effective.

B. ☐ **PARTIAL RELEASE**..... From the collateral described in the financing statement bearing the file number shown above, the Secured Party releases the property indicated below.

C. ☐ **ASSIGNMENT**..... The Secured Party certifies that the assignee, (name and address is shown below), has been assigned the Secured Party's rights under the financing statement bearing the file number shown above in the property indicated below.

D. ☒ **TERMINATION**..... The Secured Party certifies that a security interest no longer is claimed under the financing statement bearing the file number shown above.

E. ☐ **AMENDMENT**..... The financing statement bearing the above file number is changed to show ☐ Name, identity, corporate structure, or address of Secured Party as indicated below; ☐ Name, identity, corporate structure, or address of Debtor Party as indicated below; ☐ as indicated below.

CHANGES:

Debtor Signature(s) necessary only if filing an amendment:

_____ **(Debtor)**

_____ **(Debtor)**

Type or Print name (Iowa Code 335.2)

By Heritage Bank _____ **(Secured Party)**
Signature of Secured Party (See instruction #2)
By Cynthia L. Orr

Cynthia L. Orr, Vice President
Type or Print name (Iowa Code 335.2)

Dated: 9-14-99

Form Approved January 1, 1995 By: PAUL D. PATE, Secretary of State

(1) FILING OFFICER COPY-ALPHABETICAL

THIS SPACE FOR USE OF FILING OFFICER

G/22/7
DELAWARE COUNTY IOWA
FILED
'96 JUL 25 AM 10 35
RECORDER
$10.00

FINANCING STATEMENT — FOLLOW INSTRUCTIONS CAREFULLY
This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional): JASON P. ELSE (319) 922-2174

B. FILING OFFICE ACCT. # (optional):

C. RETURN COPY TO: (Name and Mailing Address)

HERITAGE BANK
311 FRANKLIN ST
DELHI, IA 52223

D. OPTIONAL DESIGNATION [if applicable]: ☐ LESSOR/LESSEE ☐ CONSIGNOR/CONSIGNEE ☐ NON-UCC FILING

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b)

1a. ENTITY'S NAME

OR

1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
JONES	CHRISTIAN	R	

1c. MAILING ADDRESS	CITY	STATE	COUNTRY	POSTAL CODE
RFD 1, CA-1, BOX 16	DELHI	IA	USA	52223

1d. S.S. OR TAX I.D.#	OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	1e. TYPE OF ENTITY	1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	1g. ENTITY'S ORGANIZATIONAL I.D.#, if any
[redacted]				☐ NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b)

2a. ENTITY'S NAME

OR

2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

2c. MAILING ADDRESS	CITY	STATE	COUNTRY	POSTAL CODE

2d. S.S. OR TAX I.D.#	OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	2e. TYPE OF ENTITY	2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	2g. ENTITY'S ORGANIZATIONAL I.D.#, if any
				☐ NONE

3. SECURED PARTY'S (ORIGINAL S/P or ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME - insert only one secured party name (3a or 3b)

3a. ENTITY'S NAME: HERITAGE BANK

OR

3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

3c. MAILING ADDRESS	CITY	STATE	COUNTRY	POSTAL CODE
311 FRANKLIN ST	DELHI	IA		52223

4. This FINANCING STATEMENT covers the following types or items of property: SEE ATTACHED SHEET FOR COMPLETE DESCRIPTION.

1985 HONDA 250R THREE WHEELER, VIN #JH3TB0600FC401394
1985 HONDA 250R THREE WHEELER, VIN #JH3TB0606FC415753

5. CHECK BOX [if applicable] ☐ This FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest (a) in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or (b) in accordance with other statutory provisions [additional data may be required]

7. If filed in Florida (check one) ☐ Documentary stamp tax paid ☐ Documentary Stamp tax not applicable

6. REQUIRED SIGNATURE(S)

Chris Jones

8. ☐ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Attach Addendum [if applicable]

9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) [ADDITIONAL FEE] (optional) ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2

Bankers Systems, Inc., St. Cloud, MN Form UCC-1-LZ-STD 2/16/96

(3) SEARCH REQUEST COPY — NATIONAL FINANCING STATEMENT (FORM UCC1) (TRANS) (REV. 12/18/95)