[redacted]

DELAWARE COUNTY IOWA
FILED
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BOOK 2002 PAGE 392
DELAWARE COUNTY IOWA
RECORDER

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
ANGIE DEMOSS

B. SEND ACKNOWLEDGMENT TO (Name and Address)

FARMERS STATE BANK
1240 8TH AVE.
MARION, IA 52302

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #
G13030

1b. This FINANCING STATEMENT AMENDMENT is ☐ to be filed [for record] (or recorded) in the REAL ESTATE RECORDS

2. ☒ TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement

3. ☐ CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

4. ☐ ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9

5 AMENDMENT (PARTY INFORMATION): This Amendment affects ☐ Debtor OR ☐ Secured Party of record. Check only one of these two boxes.
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.
☐ CHANGE name and/or address: Give current record name in item 6a or 6b also give new name (if name change) in item 7a or 7b and/or new address (if address change in item 7c.
☐ DELETE name: Give record name to be deleted in item 6a or 6b
☐ ADD name: Complete item 7a or 7b and also item 7c; also complete items 7d-7g (if applicable)

6 CURRENT RECORD INFORMATION:

OR	6a ORGANIZATIONS NAME			
	6b INDIVIDUALS LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7 CHANGED (NEW) OR ADDED INFORMATION

OR	7a ORGANIZATIONS NAME				
	7b INDIVIDUALS LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
7c MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

7d TAX ID # SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	7e TYPE OF ORGANIZATION	7f JURISDICTION OF ORGANIZATION	7g ORGANIZATIONAL ID #, If any ☐ None

8 AMENDMENT (COLLATERAL CHANGE) check only one box
Describe collateral ☐ deleted or ☐ added or give entire ☐ restated collateral description or describe collateral ☐ assigned

9 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor or if this is a Termination authorized by a Debtor check here ☒ and enter name of DEBTOR authorizing this Amendment

OR	9a ORGANIZATION'S NAME FARMERS STATE BANK 1240 8TH AVE MARION, IA 52302			
	9b INDIVIDUALS LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10 OPTIONAL FILER REFERENCE DATA

FILING OFFICE COPY—NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV 07/29/98)

UCC-1 (Long Form)

STATE OF IOWA UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1 (rev. 7-1-81)

Use only for County consumer goods filings and for ALL State filings

INSTRUCTIONS

1. Please type this form.
2. Remove pages 4 and 5 (Debtor and Secured Party copies) and send the first 3 pages with interleaved carbon paper to the filing officer with $10.00 filing fee. If the space provided for any item(s) is inadequate, the item(s) should be continued on additional sheets. Use of additional sheets or a non-standard form requires an additional fee of $2.00. At the time of original filing, the filing officer will return the third copy as evidence of filing. The Secured Party may use the third copy as a termination statement by dating and signing the termination section at the bottom of the form. No fee is required for filing a termination statement.
3. If the security agreement is filed as a financing statement, include a completed set of 3 pages of this form which need not be signed, and an additional fee of $1.00.
4. If the property is crops, (crops are filed only with the Secretary of State) the description of the real estate must reasonably identify what is described (UCC 9-110).

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

1 Debtor(s) (Last Name First) and address(es)

Loehr, Edward C.
Loehr, Leanne

113 Gay Street
Manchester, IA 52057

2 Secured party(ies) and address(es)

FARMERS STATE BANK
1240 8th AVENUE P.O. Box 569
MARION, IA 52302-3504

3 For Filing Officer (Date, Time, Number, and Filing Office)

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BOOK 1994
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4 This Financing Statement covers the following types (or items) of property:

The Collateral shall consist of the following goods and property:

2000 Kawasaki KSF 250 ATV vin#JKASFMA19YB528295

5 Name and Address of Assignee

All monies or instruments pertaining to the Collateral described above; All proceeds and products of the Collateral described above as well as any replacements, accessions, substitutions and additions to the Collateral.

RELEASED
This 1 day of Feb., 20 02
Deborah L. Peyton
DELAWARE COUNTY RECORDER
BK 2002 Pg 397

6 Description of Real Estate (see instruction 4). **U.C.C. FILED WITH: Delaware**

7

Jason M. Neighbor, Consumer Loan Officer
Signature of Secured Party

FARMERS STATE BANK
Type or Print all names (Iowa Code 335.2)

(Secured party or other appropriate signature may be substituted for debtor(s) signature only in cases covered by UCC 9-402(2), and 9-408, and must be identified as such when used.)

8 [X] Products of Collateral are covered. [ ] Debtor is a transmitting utility as defined in UCC 9 105(1)

Debtor(s) acknowledge(s) receipt of a copy of this instrument.

9

X Edward C. Loehr
Signature of Debtor Edward C. Loehr

X Leanne Loehr
Type or print all names Leanne Loehr
(Iowa Code 335.2)

1. FILING OFFICER COPY - ALPHABETICAL

Form Approved (1-2-87) By: ELAINE BAXTER, Secretary of State