

This STATEMENT is presented to THE FIL	ING OFFICER for f	filing pursuant to the Un	iform Commercial Code: 1-447
Debtor(s) (Last Name First) and address(es) DAVID E. TRASK dba BEN FRANKLIN STORE 72 EAST COURT WINTERSET, IOWA		DES MOINES NA MOINES NATL BANK	For Filing Officer (Date, Pithe, Number, and Filing Office) Fee \$9.00
This Statement refers to original Financing Statement No. Date filed: July 24 , 19 78 Filed with Madison Cnty Recorder			MARY E. WELTY RECORDER
A. CONTINUATION The original financing statement bearing the file number shown above, is still effective. (DO NOT use with form to continue a farm filing that has been filed in a county prior to Jan. 1, 1975.) PARTIAL RELEASE PARTIAL RELEASE C. ASSIGNMENT The secured party certifies that the assignee, (name and address is shown below), has been assigned the secured parties rights under the financing statement bearing the file number shown above in the property indicated below. The Secured Party certifies that a security interest no longer is claimed under the financing statement bearing the 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; as indicated below; as indicated below;			
Debtor Signature(s) necessary only if filing an amendmer	nt; by signing Debtor(s) a (Debtor) (Debtor)	By:	Secured Party. See instruction #2) MOINES NATIONAL ASSOCIATION
Type or Print name (Iowa Code 335.2) Form Approved (7-1-81) By: Secretary of State — ELAINE BAXTER	(Deptor)	Type or Print name (Io	wa Code 335.2) January 30 , 19 88
1. FILING OFFICER COPY - ALPHABETICAL			1-9

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