

THIS SPACE FOR USE OF FILING OFFICER

FILED NO. 793

BOOK 3 PAGE 776

97 AUG 25 PM 1:51

MICHELLE UTSLER
RECORDER
MADISON COUNTY, IOWA

REC \$ 22.00

AUD \$ _____

R.M.F. \$ 1.00

SEARCHED
SERIALIZED

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 6 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional) NEAL A. BETTELSPACHER (605) 225-5277	B. FILING OFFICE ACCT. # (optional)
C. RETURN COPY TO: (Name and Mailing Address) HOME FEDERAL SAVINGS BANK 202 WEST HIGHWAY 38, BOX 400 HARTFORD, SD 57033	
D. OPTIONAL DESIGNATION (if applicable): <input type="checkbox"/> LESSOR/LESSEE <input type="checkbox"/> CONSIGNOR/CONSIGNEE <input type="checkbox"/> 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 ANTHONY	FIRST NAME ALAN V.	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 2721 DEER RUN AVENUE		CITY MACKSBURG	STATE COUNTRY POSTAL CODE IA 50155-8010
1d. S.S. OR TAX I.D.# 479-66-2546	OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	1e. TYPE OF ENTITY	1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION <input type="checkbox"/> 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 ANTHONY	FIRST NAME NANCY J.	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS 2721 DEER RUN AVENUE		CITY MACKSBURG	STATE COUNTRY POSTAL CODE IA 50155-8010
2d. S.S. OR TAX I.D.# 485-68-0185	OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	2e. TYPE OF ENTITY	2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION <input type="checkbox"/> 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 HOME FEDERAL SAVINGS BANK			
OR			
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 202 WEST HIGHWAY 38, BOX 400		CITY HARTFORD	STATE COUNTRY POSTAL CODE SD 57033

4. This FINANCING STATEMENT covers the following types or items of property: **SEE ATTACHED SHEET FOR COMPLETE DESCRIPTION. ALL PERSONAL PROPERTY AND FIXTURES, INCLUDING BUT NOT LIMITED TO ALL MACHINERY AND EQUIPMENT, ACCOUNTS RECEIVABLE, INVESTMENTS, ACCOUNTS, CONTRACT RIGHTS, CHATTEL PAPER, DOCUMENTS AND INSTRUMENTS, GENERAL INTANGIBLES, NOW OWNED OR HEREAFTER ACQUIRED, INCLUDING BUT NOT LIMITED TO ALL RIGHTS TO PAYMENT UNDER THAT CONTRACT BETWEEN DEBTORS AND FARMERS COOPERATIVE COMPANY OF AFTON, AND FARMLAND INDUSTRIES, INC., DATED APRIL 4, 1997.**

TERMINATED
RELEASED 6-12-98 SEE
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5. CHECK <input checked="" type="checkbox"/> This FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest BOX (a) in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the (if applicable) 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) <input type="checkbox"/> Documentary stamp tax paid <input type="checkbox"/> Documentary Stamp tax not applicable
6. REQUIRED SIGNATURE(S) <i>Alan V. Anthony</i> <i>Nancy J. Anthony</i>	8. <input type="checkbox"/> 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) <input checked="" type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2

FINANCING STATEMENT ADDENDUM — FOLLOW INSTRUCTIONS

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AdA. NAME OF FIRST DEBTOR ON RELATED FINANCING STATEMENT
 ENTITY'S NAME

INDIVIDUAL'S LAST NAME ANTHONY	FIRST NAME ALAN V.	MIDDLE NAME, SUFFIX
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AdB. MISCELLANEOUS:

Ad1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one name (Ad1a or Ad1b)

Ad1a. ENTITY'S NAME

OR

Ad1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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Ad1c. MAILING ADDRESS

CITY	STATE	COUNTRY	POSTAL CODE
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Ad1d. S.S. OR TAX I.D.#

Ad1e. TYPE OF ENTITY

Ad1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION

Ad1g. ENTITY'S ORGANIZATIONAL I.D.#, if any NONE

Ad2. ADDITIONAL SECURED PARTY'S EXACT FULL LEGAL NAME - Insert only one name (Ad2a or Ad2b)

Ad2a. ENTITY'S NAME

OR

Ad2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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Ad2c. MAILING ADDRESS

CITY	STATE	COUNTRY	POSTAL CODE
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Ad3a. This FINANCING STATEMENT covers timber to be cut, minerals, or mineral-related accounts, or is filed as a fixture filing

Ad3b. This FINANCING STATEMENT covers crops growing or to be grown on the real estate described below

Ad4. Description of real estate:

Ad5. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

Ad6. REQUIRED SIGNATURE

Alan V. Anthony *Nancy J. Anthony*

Ad7. Additional collateral description:

FOR THE HOG CONFINEMENT FACILITIES LOCATED AT, PARCEL 'A' IN THE SE CORNER OF THE NE 1/4 OF SECTION 33, T75N, R29W OF 5TH P.M., MADISON COUNTY, IOWA, AND MORE PARTICULARLY DESCRIBED AS FOLLOWS, BEGINNING AT THE E1/4 CORNER OF SAID SECTION 33, THENCE SOUTH 89 DEGREES, 47 MINUTES, 58 SECONDS, WEST 660.00 FEET ALONG THE SOUTH LINE OF SAID NE 1/4; THENCE NORTH 660.00 FEET; THENCE NORTH 89 DEGREES, 47 MINUTES, 58 SECONDS EAST 660.00 FEET TO THE EAST LINE OF SAID NE 1/4; THENCE SOUTH 660.00 FEET TO THE POINT OF BEGINNING, CONTAINING 10.00 ACRES, SUBJECT TO ROADWAY EASEMENTS OF RECORD.

Ad8. Debtor is a TRANSMITTING UTILITY (if applicable)