

Date stamped by Julian Code:
EXAMPLE: 87 182 09 00243
87: Year
182: Number of days counted from Jan. 1
09: Time of day filed (9:00 a.m.)
00243: Document number

Fee \$ _____
Cash ☐
Check ☐
Account # _____

For Secretary of State Office Use Only
FILING STAMP

900.9291
FILED
DOUGLAS COUNTY KANSAS
JUN 27 11 2:22
REGISTER OF DEEDS

PLEASE TYPE THE INFORMATION ON THIS FORM ACCORDING TO ALL INSTRUCTIONS PRINTED ON THE BACK OF THE UCC 1 FORM

Debtor Name	Social Security	Secured party and Address
1. Davis, Nancee G.	_____	Home Federal Savings Bank
2.	_____	PO Box 5000
3.	_____	Sioux Falls, SD 57117
4.	_____	Assignee of Secured Party and Address
Mailing Address	Employer ID #	
#4C Mobile Lodge		
Lecompton, KS 66050		

THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT NO. 001539 (Limited to one transaction per UCC 3)
DATED August 31, 1989 FILED WITH Douglas County

<input checked="" type="checkbox"/> CONTINUATION The financing statement bearing the above file number is still effective. Must be signed by secured party for UCC 3; secured party and debtor for Effective Financing Statement. Fee: Non-Ag \$3 and \$2* Ag \$8 and \$2* *For each additional debtor name	<input type="checkbox"/> TERMINATION The secured party no longer claims a security interest under the financing statement bearing the above file number. Must be signed by the secured party. Fee: Non-Ag \$2 and \$2* Ag \$3 and \$2* *For each additional debtor name	<input type="checkbox"/> PARTIAL RELEASE The secured party releases the collateral described below from the financing statement bearing the above file number. Must be signed by secured party for UCC 3; secured party and debtor for Effective Financing Statement. Fee: Non-Ag \$3 and \$1* Ag \$8 and \$1* *For each additional debtor name	<input type="checkbox"/> ASSIGNMENT The secured party's rights to the property described below under the statement bearing the above file number have been assigned to the assignee whose name and address are listed above right. Must be signed by secured party for UCC 3; secured party and debtor for Effective Financing Statement. Fee: Non-Ag \$3 and \$1* Ag \$8 and \$1* *For each additional debtor name	<input type="checkbox"/> AMENDMENT The financing statement bearing the above file number is amended as set forth below. Must be signed by both debtor and secured party for UCC 3 and Effective Financing Statement. Fee: Non-Ag \$3 and \$2* Ag \$8 and \$2* *For each additional debtor name
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This area is for the description of Collateral, Release, Collateral if assigned, or description of Real Estate, if necessary:

1990 Champion 28X64 MH
0508094670
Includes: Skirting, Central Air, Dishwasher, Disposal

Check (X) if covered: ☐ PROCEEDS of collateral are also covered. ☐ PRODUCTS of collateral are also covered.

Use the following spaces only for Farm Products requiring EFFECTIVE FINANCING STATEMENT (EFS) filing in accordance with the Food Security Act of 1985.

FARM PRODUCT	CODE	YEAR	QUANTITY	COUNTY CODE	LOCATION IN COUNTY

Pay proceeds to Debtor and Secured Party unless otherwise checked: ☐ Secured Party only ☐ Debtor only

Number of Additional Sheets, if any: _____

Filed with the Secretary of State as ☐ UCC 3 ☐ EFS ☐ BOTH

Signature(s) of Debtor(s)

Home Federal Savings Bank

Pat Scott VP/Loan Service