

# Uniform Commercial Code — Statement of Continuation, Release, Amendment, Etc. — Form UCC-2

1. Type form. 2. If space is inadequate continue on additional sheet. 3. Enclose filing fee.

4. Filings in the Secretary of State's Office must contain either the debtor's federal employer identification number or social security number.

Prepaid account number XXXX  
2542

1. Debtor (if individual, last name first) and address:  
Suder, John M. & Linda D.  
Stebbins, Arliss L. & Kay Minard  
Hoss, Dennis C. & Deanna K.  
Allison, Robert L. & Lauri  
Suder, Carolee  
3111 W. 6th Street  
Lawrence, Kansas 66044

FEIN \_\_\_\_\_ or SSN \_\_\_\_\_

Debtor (if individual, last name first) and address:

FEIN \_\_\_\_\_ or SSN \_\_\_\_\_

2. Secured Party and address (there may be more than one):  
(Type information inside gray area)

Mercantile Bank of Lawrence N.A.  
formerly known as  
The First National Bank of Lawrence  
~~Successor to~~  
~~Lawrence National Bank & Trust Co.~~  
P.O. Box 428  
Lawrence, Ks 66044

For filing officer

FILED  
DEPT. OF REVENUE  
'94 FEB 3 PM 1 45  
CLERK OF DEEDS  
REGISTER OF DEEDS

9008129

3. Assignee and address if applicable

4. This statement refers to Original Financing Statement Number: 581 Original filing date 3-30-89 Filed with Dg. Co. KS

5. ☒ **A. Continuation** The original Financing Statement bearing the above file number is still effective.
- ☐ **B. Termination** The secured Party of record no longer claims a security interest under the Financing Statement bearing the above file number.
- ☐ **C. Release** From the Collateral described in the Financing Statement bearing the above file number, the Secured Party of record releases the collateral below.

☐ **D. Assignment**

The Secured Party of record has assigned the Secured Party's rights in the property described below under the Financing Statement bearing the above file number to the Assignee whose name and address are shown above.

☐ **E. Amendment**

The Financing Statement bearing the above file number is amended as set forth below.

6. This area is for describing changes.

Number of Additional Sheets, if any. \_\_\_\_\_

Signature of Debtor(s)

(Necessary if any amendment changes the classification or the value of collateral)

J. Rombough, CLA

Signature(s) of Secured Party (ies)

Form UCC- 2 Form approved by Kansas Secretary of State

ck  
\$6.00