DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information.  Ta. ORGANIZATION'S NAME  Ta. ORGANIZATION'S NAME  Todd  MAILLING ADDRESS  325 Emmons St  DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information of the Individual Debtor information.  2a. ORGANIZATION'S NAME  FIRST PERSONAL NAME  Jennifer  MAILING ADDRESS  325 Emmons St  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only of the Individual Debtor information.  SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide	elaware County, aneen Schindler K: 2022 PG: 1	RECORDER	
name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor informat    1a. ORGANIZATION'S NAME   FIRST PERSONAL NAME   Todd	THE ABOVE SPACE IS FO	OR FILING OFFICE USE	ONLY
Todd  Ib. INDIVIDUAL'S SURNAME  Larsen  MAILING ADDRESS  325 Emmons St  DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor informa  2a. ORGANIZATION'S NAME  Larsen  MAILING ADDRESS  325 Emmons St  MILING ADDRESS  325 Emmons St  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one	bbreviate any part of the Debto	r's name); if any part of the In	ndividual Debtor's
Todd  MILING ADDRESS  325 Emmons St  DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor informa  2a. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME  Larsen  MAILING ADDRESS  325 Emmons St  MAILING ADDRESS  325 Emmons St  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of the individual Debtor informa  3a. ORGANIZATION'S NAME  Community Savings Bank  3b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  Community Savings Bank  3b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  Community Savings Bank  CITY  Edgewood  COLLATERAL: This financing statement covers the following collateral:  A cabin on leased land situated in Delhi, Iowa, also known as 260th St. Delhi, IA 52223 and legally described as: Cabin lying Mauoketa River bordering Lake Delhi also known as Hartwing Manusketa River bordering Lake Delhi also known as Hartwing Alberts and the state of the sta	n in item 10 of the Financing St	atement Addendum (Form UC	CC1Ad)
Todd  MAILING ADDRESS  325 Emmons St  DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor informa  2a. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME  Larsen  MAILING ADDRESS  325 Emmons St  GITY  Hiawatha  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only of ASSIGNOR SECURED PARTY: Provide only of AS			
MAILING ADDRESS  325 Emmons St  DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor informated. A cabin on leased land situated in Delhi, Iowa, also known as Hartwit and provide the Individual Debtor informated. CITY Hiawatha  CITY Hiawatha  FIRST PERSONAL NAME Jennifer  CITY Hiawatha  CITY Hiawatha  FIRST PERSONAL NAME Jennifer  CITY Edgewood  CITY Edgewood  COLLATERAL: This financing statement covers the following collateral:  A cabin on leased land situated in Delhi, Iowa, also known as 260th St. Delhi, IA 52223 and legally described as: Cabin lying Mauoketa River bordering Lake Delhi also known as Hartwing Address and the control of the	ADDITIC	DNAL NAME(S)/INITIAL(S)	SUFFIX
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01 E Union St  COLLATERAL: This financing statement covers the following collateral:  A cabin on leased land situated in Delhi, Iowa, also known as 260th St. Delhi, IA 52223 and legally described as: Cabin lyin Mauoketa River bordering Lake Delhi also known as Hartwi	ADDITIC	ADDITIONAL NAME(S)/INITIAL(S)	
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Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a Trust (see UCC1Ad, item 17 and In . Check <u>only</u> if applicable and check <u>only</u> one box:	ructione)   I   Iboing administr	ered by a Decedent's Persona if applicable and check <u>only</u> o	•
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmi		Itural Lien Non-UCC	
ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor	6b. Check only	maran Elen	

## **UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS** 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a, ORGANIZATION'S NAME 12b. INDIVIDUAL'S SURNAME Larsen FIRST PERSONAL NAME Todd ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Mathew THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a. ORGANIZATION'S NAME OR 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

15. This FINANCING STATEMENT AMENDMENT:	17. Description of real estate:
15. This FINANCING STATEMENT AMENDMENT:  ☐ covers timber to be cut ☐ covers as-extracted collateral ☑ is filed as a fixture filing  16. Name and address of a RECORD OWNER of real estate described in item 17  (if Debtor does not have a record interest):  Marcheta R. Cooey Lux Estate	· ·
	#220-30-01-006-09 located in Section 30-Township 88 Range 4.

18. MISCELLANEOUS: