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	CC FINANCING STATEMENT AMENDMEN PLICOW INSTRUCTIONS	Т				
_	NAME & PHONE OF CONTACT AT FILER (optional) Rylie Waite 563-927-4250		Daneen Schin DELAWARE COU	dier, RE NTY IOWA	CORDER/REGI	STRAR
В.	E-MAIL CONTACT AT FILER (optional)	<u> </u>	· [
Ę,	SEND ACKNOWLEDGMENT TO: (Name and Address)		1			
V	Commodity Credit Corporation		1			
l	c/o Delaware County Farm Service Agency 200 South 12th Street	y				
ı	Manchester, IA 52057	1				
			THE ABOVE SPA	ACE IS FOR FI	LING OFFICE USE (ONLY
	INITIAL FINANCING STATEMENT FILE NUMBER 118-1152	<u> </u>	1b. This FINANCING STATE (or recorded) in the REA	L ESTATE REC	ORDS	•
2.[TERMINATION: Effectiveness of the Financing Statement identified abov	e is terminated	Filer: attach Amendment Ac with respect to the security intere			
3.[ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b					
	For partial assignment, complete items 7 and 9 <u>and</u> also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and also indicate affected complete items 7 and 9 and 10	ollateral in item	8			
4.[CONTINUATION: Effectiveness of the Financing Statement identified ab continued for the additional period provided by applicable law	ove with respec	t to the security interest(s) of Sec	cured Party auth	orizing this Continuation	n Statement is
5.	PARTY INFORMATION CHANGE:					
	Check <u>one</u> of these two boxes: This Change affects Debtor or Secured Party of record Debtor or Secured Party of record	GE name and/or	address: CompleteADD na	me: Complete iter	m DELETE name:	Give record name
6.	CURRENT RECORD INFORMATION: Complete for Party Information Changes. ORGANIZATION'S NAME	ge - provide only				
OR	6b. INDIVIDUAL'S SURNAME Vaske	FIRST PERSON Daryl	NAL NAME	John	NAME(S)/INITIAL(S)	SUFFIX
7.	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Transport of Party Information Complete for Assignment or Party Information Transport of Party Information Complete for Assignment or Party Information Complete for Or Party Informa	on Change - provide	only <u>one</u> name (7a or 7b) (use exact, full n	name; do not omit, mo	dify, or abbreviate any part of	the Debtor's name)
OR	7b. INDIVIDUAL'S SURNAME		· ·			· · · · · ·
	INDIVIDUAL'S FIRST PERSONAL NAME					
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c.	MAILING:ADDRESS	CITY		STATE POS	TAL CODE	COUNTRY
8.	COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral	DELETE collateral	RESTATE covere	d collateral A	SSIGN collateral
_	Indicate collateral:	oonatorar		NESTATE COVER	d collateral	JSIGIV CONALENAI
	·					
_				-	<u> </u>	
9. 1	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN	MENDMENT: F		name of Assignor	, if this is an Assignmen	t)
9. 1	f this is an Amendment authorized by a DEBTOR, check here and provide not get an Order of the same and provide not get an armonic get and provide not get an armonic get and provide not get an armonic get a			name of Assignor	, if this is an Assignmen	t)
9. I	f this is an Amendment authorized by a DEBTOR, check here and provide no		ng Debtor		, if this is an Assignmer	t)

10. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT AMENDMENT ADDENDUM **FOLLOW INSTRUCTIONS** 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 2018-1152 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME **Commodity Credit Corporation** 12b, INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) 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 Vaske Daryl John 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): 15. This FINANCING STATEMENT AMENDMENT: 17. Description of real estate: The Southeast Quarter (SE1/4) of the 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 Northwest fractional Quarter (NWfr1/4) and (if Debtor does not have a record interest): the Southwest Quarter (SW1/4) of the Northeast fractional Quarter (NEfr1/4) of Section Four (4), Township Eighty Nine (89) North, Range Five (5), West of the Fifth P.M. exept Parcel B, part of the Southeast Quarter (SE1/4) of the Northwest fractional Quarter

(NWfr1/4) as recorded in Book 2004, Page 3185.

18. MISCELLANEOUS: