

BK: 2016 PG: 1756
Instr. Number: 1756
Recorded: 7/29/2016 at 11:59:51.0 AM
Fee Amount: \$12.00
Revenue Tax:
Lorie A. Thompson RECORDER
Harrison County, Iowa

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Phone: (800) 331-3282 Fax: (818) 662-4141

B. E-MAIL CONTACT AT FILER (optional)
CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address) 14060 - FARM CREDIT

CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	55021134
	IAIA FIXTURE

File with: Harrison, IA

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
BK-2012 PG-3155 12/5/2012 CC IA Harrison

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law
5. PARTY INFORMATION CHANGE:
Check one of these two boxes: Debtor or Secured Party of record
AND Check one of these three boxes to:
 CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c
 ADD name: Complete item 7a or 7b, and item 7c
 DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME
Wiltse

INDIVIDUAL'S FIRST PERSONAL NAME	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Russell	K	

7c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
Lincoln	NE	68502	USA

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
- Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME
FARM CREDIT SERVICES OF AMERICA, PCA

OR

9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: Wiltse, Gerald K
55021134 CREDIT SERVICES - 633 151284750

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

BK-2012 PG-3155 12/5/2012 CC IA Harrison

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a. ORGANIZATION'S NAME

FARM CREDIT SERVICES OF AMERICA, PCA

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

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

Wiltse

FIRST PERSONAL NAME

Gerald

ADDITIONAL NAME(S)/INITIAL(S)

K

SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

Debtor Name and Address:

Wiltse, Gerald K - 2734 Britt Ave , Modale, IA 51556

Salter, Franklin J - 108 N Archer PO Box 134, Modale, IA 51556

Wiltse, Linda - 3250 S 12th St Apt C8 , Lincoln, NE 68502

Wiltse, Russell K - 1215 Arapahoe St Apt 316 , Lincoln, NE 68502

Secured Party Name and Address:

FARM CREDIT SERVICES OF AMERICA, PCA - PO BOX 2409 , Omaha, NE 68103

Mid-Continent Irrigation Inc - 2930 West 23rd Road , Fremont, NE 68025

1) Mid-Continent Irrigation Inc

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):

Gerald K Wiltse

17. Description of real estate:

S1/2NE1/4 & N1/2SE1/4 33-79N-45W

Parcel ID 320000482401000

18. MISCELLANEOUS: 55021134-IA-85 14060 - FARM CREDIT SERVICES FARM CREDIT SERVICES OF File with: Harrison, IA CREDIT SERVICES - 633 151284750

