X16 22 01 83-002053



Debtor(s) (Last Name First) (Show Address)	Secured Party and Address Filing Data		
HARDERS, Sheen R. and Mency A., (hier) Box 177, Rural Route #3 Wood River, Mebraska 68883	Metropolitan Life Insurance Company 2550 N. Diers Avenue		
		Termination Statement. The Me certifies that they no longer cla Agreement bearing the file number of the control of the contro	etropolitan Life Insurance Company, secured party named herein, im a security interest under the Financing Statement and Security of the shown above.
		Continuation Statement. The or foregoing Debtor and the Metro bearing the file number shown	riginal Financing Statement and Security Agreement between the politan Life Insurance Company, the Secured Party named herein, above, is still effective.
		Partial Release. From the collat bearing the file number shows Party named herein, releases the party named herein here the party named herein here the party named herein here the party named	eral described in the Financing Statement and Security Agreement above, the Metropolitan Life Insurance Company, the Secured ne following:
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	RECORDERS MEMO EY2 MWYY SWYY + FE EV		
	Reg. of Deeds		
This lien is to continue in full fo	Reg. of Deeds rce and effect on the remaining property described in said Financ-		
This lien is to continue in full foing Statement and Security Agr	Reg. of Deeds rce and effect on the remaining property described in said Financ-		
ing Statement and Security Agr	rce and effect on the remaining property described in said Finance Company Metropolitan Life Insurance Company		
This lien is to continue in full for ing Statement and Security Agr	rce and effect on the remaining property described in said Financ-		

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