## Uniform Commercial Code — Financing Statement — Form UCC-1

Type form, 2. If space is inadequate continue on additional sheet, 3. Enclose filling fee.

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

Prepaid account number			
Debtor (if individual, last name first) and address:	Debtor (if individual, I	Debtor (if individual, last name first) and address:	
CRAIG, FLOYD			
1900 WEST 31ST C-2			
LAWRENCE, KANSAS 66046			
FEIN - or SSN	FEIN	or SSN	
		For filing officer	
2. Secured Party and address (there may be more than one):			
(Type Information inside gray area)			
		DOUGLAS COUNTY KANSAS	
		DOUGLAS COUNTY	
HANNA'S APPLIANCE		THE COURT FRANSAS	
		1994 NOV -3 PM 1:56	
933 MASSACHUSETTS LAWRENCE, KANSAS 66044		- 111 1. 56	
LAWRENCE, RRIDAD 00077		SUE MEUSTIFTER	
		REGISTER OF DEEDS	
		J. DLLUS	
3. Assignee and address if applicable			
		Qaan	
		9009674	
5. (a) This financing statement covers the following types (or items) of GIBSON FOOD FREEZER MODEL # CFU12M2A (b) If collateral is crops, the above described crops are growing or are	.W3 SERIAL # WB43		
(c) If applicable, the above (goods are to be come fixtures on:) (timber financed at the wellhead or minehead of the well or mine located on:)			
Name of record owner:			
6. If filing without debtor signature items a, b, c or d must be marked:  a. [ ] Collateral already subject to a security interest in an location is changed to this state.  b. [ ] Collateral is proceeds of the original collateral in who, c. [ ] Collateral as to which the filling has lapsed.	ich a security interest was per	fected	
d. [ ] The filing covers collateral acquired after a change	or name locality of corporate s	- Control of Gooks	
		1/,	
		A auras	
Signature of Deptor	Signa	ature of Secured Party (or assignee)	
(XX Hand I bas		1/1/1/	
The said		ature of Sourced Both (or assistant)	
Signature of Debtor	Signature of Secured Party (or assignee)		