TATEMENT OF CONTINUATION, In Secretary of State S Unice, main Parts 1 and 2 of FEIN or SSN is required on this form. The Social	bace is inductuale, comme on accurate strated, with the filing fee. 4. Either a this form (with first carbon and stub attached), with the filing fee. 4. Either a Security Number of the individual is required for a sole Proprietorship.
(a) DESTOR NAME & ADDRESS (If an Individual, type last name first.)	1.(b) DEBTOR NAME & ADDRESS (If an Individual, type last name first.)
Douglas County, Kansas	
Douglas County Courthouse	
11th & Massachusetts	
Lawrence, Kansas 66044	
N (Federal Employer Ident. No.) SSN (Social Security No.)	FEIN (Federal Employer Ident. No.) SSN (Social Security No. OR
48-0780431 OR SECURED PARTIES & ADDRESSES (Type Inside shaded box below)	
State Street Bank & Trust Co. of Missou	
Corporate Trust Department	E DOUGL FILED
211 N. Broadway, 39th Fl.	E COLAS COUNTY.
St. Louis, MO 63102	1997
	JUL 24 DV.
	SHE 10- FH 12: 57
3. ASSIGNEES & ADDRESSES (Type Inside shaded box below)	REGISTEUSTIE
	DOUGLAS COUNTY VANCAS 1997 JUL 24 PH 12: 57 SUE NEUSTIFIEL REGISTER OF DEEDS
	Register of Deeds
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