Uniform Commercial Code — Financing Statement — Form UCC-1

1. Type form. 2. If space is inadequate continue on additional sheet. 3. Enclose filing fee.

4. Filings 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, last name first) and address:	
Lawrence Auto Parts, Inc.	Genuine Parts Company	
919 New Hampshire	250 Osage	
Lawrence, KS 66044	P.O. Box 2919 Kansas City, KS 66110-2919	
	Name of the control o	
EIN or SSN	FEIN or SSN	
	For filing officer	
Secured Party and address (there may be more than one). (Type information inside gray area)	9013843	
	DOUGLAS COUNTY MANSAGE	
	1997 APR 23 AM 11: 19	
	SUE NEUSTIFTER	
	REGISTER OF DEEDS	
Assignee and address if applicable		
existing or acquired. All general interest of give	of debtor's business whether now or hereafter tangibles of debtor, whether now existing or e rise to any of the foregoing: and all proceed tation, all insurance proceeds payable with me to be grown on: (Describe real estate)	
c) If applicable, the above (goods are to be come fixtures on:) (timber nanced at the wellhead or minehead of the well or mine located on:	per is standing on:) (minerals or the like, including oil and gas, or accounts will be :) (Legal description of real estate)	
ame of record owner:		
a. [] Collateral already subject to a security interest in a location is changed to this state. b. [] Collateral is proceeds of the original collateral in w c. [] Collateral as to which the filing has lapsed. d. [] The filing covers collateral acquired after a change	another jurisdiction when it was brought into this state, or when the debtor's which a security interest was perfected	
Signature of Debros MAY Bues VP	1000 A 1000 A	
MINERUM VP		
Signature of Debtor	Signature of Secured Party (or assignee)	