Uniform Commercial Code — Financing Statement — Form UCC-1

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, lest name first) and address: Acct #0102345 Newman, Craig 907 -XXXXXX Cedar Place Eudora, KS 66025	Debtor (if in	idividual, last name first) and address:
ein - or SSN 207 - 64 - 9421 _	FEIN	or SSN
The Associates 2329 S Iowa Ste C&D Lawrence, KS 66046		FOR HING Officer FILED EQUALAS GOUNTY KANSAS '94 MAR 2 PM 1 15 SUE NEUSTIFTER REGISTER OF DEEDS
Assignee and address if applicable		9008302
Nerk, if applicable: [] Products of collateral are also covered 5. (a) This financing statement covers the following types (or items) of p SEE ATTACHED SCHEDULE "A" (b) If collateral is crops, the above described crops are growing or are to	oroperty: (Descrit	·•)
c) If applicable, the above (goods are to be come fixtures on:) (timber in inanced at the wealthead or minehead of the well or mine located on:)	is standing on:) (r (Legal description)	ninerals or the like, including oil and gas, or accounts will be on of real estate)
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 and location is changed to this state. b. [] Collateral is proceeds of the original collateral in which c. [] Collateral as to which the filling has lapsed. d. [] The filing covers collateral acquired after a change of Signature of Debtor	ch a security inter	rest was perfected
Signature of Debtor		Signature of Secured Party (or assignee)