Uniform Commercial Code — Financing Statement — Form UCC-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.

Debtor (if individual, last name first) and address:		Prepaid account number
MARVIN W. LAMBERT	Debtor (if indivi	idual, last name first) and address:
3008 YELLOWSTONE DR	CONNIE J. LAMBERT	
LAWRENCE, KS. 66047	3008 YELLOWSTONE DR	
FEIN or SSN	LAWREN	ICE, KS. 66047
	FEIN	or SSN
Secured Parky and ordered (these		For filing officer
Secured Party and address (there may be more than one): (Type information inside gray area)		
DENEFICIAL KANSAS INC.		
BENEFICIAL MORTGAGE CO. OF KANSAS, INC.		
BENEFICIAL CREDIT SERVICES		9014015
8771 ¥ 95 ST		403
OVERLAND PARK, KS 66212		
Assignee and address if applicable		F'LED
		DOUGLAS COUNTY MANNA
		1997 JUN 10 AM 11: 17
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