		Prepaid account number
1. Debtor (if individual, last name first) and address:	Debtor (if indi	vidual, last name first) and address:
John The Evangelist		
29 Vermont rrence, KS 66044		
FEIN <u>48-0576029</u> or SSN	FEIN -	or SSN
		For filing officer
 Secured Party and address (there may be more than one): (Type information inside gray area) 		
() , , , , , , , , , , , , , , , , , , 		
Commercial Capital Corporation		511.55
7920 State Line Suite 101 Prairie Village, KS 66208		FILED DOUGLAS COUNTY KANSAS
		1007 UN -
		1994 JUL -5 PM 2: 24
		- OUE NELICENER
3. Assignee and address <i>if applicable</i> Bank of Blue Valley		REGISTER OF DEEDS
P.O. Box 26128		0.0000-
Grand Damis VC (CODE (100		
Overland Park, KS 66225-6128 4. Mark, <i>if applicable</i> : [] Products of collateral are also covere 5. (a) This financing statement covers the following types (or items) of	f property: (Describe)	tor is a transmitting utility
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