

1. DEBTORS NAMES & ADDRESSES (Last Name First)	2. SECURED PARTIES (OR ASSIGNEES) & ADDRESSES	FOR FILING OFFICER (Date, Time, Number, & Office)
James A. Schneider 394-40-9427 Lois R. Schneider 282-48-3948 3708 Stetson Dr. Lawrence, KS 66049	Emprise Bank, N.A. 2435 Iowa, P.O. Box 3466 Lawrence, KS 66046	9 007688

3 A. This Financing Statement covers the following types (or items) of property: (Describe)

See attached Exhibit "A"

3 B. (If Collateral is Crops) The above described Crops are growing or are to be grown on: (Describe real estate)

3 C. If applicable, the above (Goods are to become fixtures on:) (Timber is standing on:) (Minerals or the like, including oil and gas, or accounts will be financed at the wellhead or minehead of the well or mine located on:) LEGAL DESCRIPTION OF REAL ESTATE.

NAME OF RECORD OWNER:

James A. Schneider and Lois R. Schneider

See attached legal description

4. Check if: ☐ Products of Collateral are claimed.

DEBTOR SIGNATURES

SECURED PARTY OR ASSIGNEE SIGNATURES

X James A. Schneider
X *[Signature]*

EMPRISE BANK, N.A., LAWRENCE

By

[Signature]

FORM UCC FINANCING STATEMENT

Cynthia J. Mulich, Asst. Vice President
KANSAS UNIFORM COMMERCIAL CODE

FILING OFFICER COPY ALPHABETICAL

Form approved by Secretary of State

