ORM UCC-1 KANSAS	INSTRUCTIONS: 1. Please TYPE this form size. 3. When filing in Secretary of State's Office attached), with the filing fee. 4. Either a FEIN or SS		tinue on additional she form(with first carbon a	eets of same and stub	PREPAID ACCOUNT NO.	
1.(a) DEBTOR NAME & ADDRES			AME & ADDRESS			
Seales, Ross L. 504 N. Troost Olathe, KS 66061		Seales, Sylvia 504 N. Troost	1.(b) DEBTOR NAME & ADDRESS (if an Individual, type last name first.) Seales, Sylvia E. 504 N. Troost Olathe, KS 66061			
iN (Federal Employer Ident. No.)	SSN (Social Security No.) OR 487-30-8883	FEIN (Federal Employ	/er Ident. No.)		cial Security No.) 4-5964	
2. SECURED PARTIES & ADDRESSES (Type Inside shaded box below)			For Filling Officer Use Only			
FIRST KANSAS BANK & TRUST CO. 109 EAST MAIN P.O. BOX 67 GARDNER, KS 66030				DOUGLAS		
3. ASSIGNEES & ADDRESSES If applicable (Type Inside shaded box below)				SUE NI REGISTE	20 PM 1: 51 EUSTIFTER ER OF DEEDS	
979 Liberty 14' x 70' Mob 70' Mobile Home SN 1: 0380, together with all equaccessions, additions, repl	The Debtor is a transmiting of property: Describe below the below of Property: Describe below the Describe b	gether with all equi nt and accessories her any of the	going is own	cessories; 1977 14' x 66' l	Mobile Home SN acquired later; all	
(b) If collateral is crops, the above describe	ed crops are growing or are to be grown on: Describe	e real estate below.				
.(c) If applicable, the above (goods are to be minehead of the well or mine located o	ecome fixtures on:) (Tirnber is standing on:) (Minera n:) (Type Legal Description of Real Estate below.)	al or the like, including oil and g	as, or accounts will be fi	inanced at the wellh	ead or	
	ss. L. Seales and Sylvia E. Seales					

DEBTOR SIGNATURES

X DOS SIGNATURES

Collateral as to which the filing has lapsed.
The filing covers collateral acquired after a change of name identity or corporate structure of the Debtor.

SECURED PARTY / ASSIGNEE SIGNATURES

Form UCC 1 Form approved by Kansas Secretary of State