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 or social security number. When the debtor is a sole proprietor, only the debtor's social security number is authorized to be filed.

			Prepaid account number
1. Debtor (if individual, last name first) and address: SHORTER TR., COLLINS PORTER TR., COLLINS 611 ILLINOIS LAWRENCE, KANSAS 66044		Debtor (if individual, last name first) and address:	
FEIN	or SSN	FEIN	or SSN
			For filing officer
Secured Party and address (there may be more than one):     (Type Information Inside gray area)			9011522
			the state of the s
9	HANNA'S APPLIANCE 933 MASSACHUSETTS LAWRENCE, KANSAS 66044		1995 OCT 25 AN IO: 58
			REGISTER OF TERS
3. Assignee and a	ddress if applicable		
FRIGIL	nd ble: [ ] Products of collateral are also covering statement covers the following types (or items) of the AIR CONDTIONER MODEL # FACTORS, the above described crops are growing or an	of property: (Describe)	a transmitting utility  # JK51105599  real estate)
(c) If applicable, the financed at the we	he above (goods are to be come fixtures on:) (timb ellhead or minehead of the well or mine located on	er is standing on:) (minerals on:) (Legal description of real	or the like, including oil and gas, or accounts will be estate)
Name of record o	wner:		
a.[] b.[] c.[]	debtor signature items a, b, c or d must be marked Collateral already subject to a security interest in location is changed to this state.  Collateral is proceeds of the original collateral in w Collateral as to which the filing has lapsed.  The filing covers collateral acquired after a change	another jurisdiction when it wa which a security interest was p	erfected / C
			Haurei
	Signature of Debtor	Sig	nature of Secured Party (or assignee)
-XX	Signature of Debtor	(40)	gnature of Secured Party (or assignee)