rnis STATEMENT is presented to a filing officer for filing pursuant to the Uniform Commercial Code.		
1. DEBTOR NAMES & ADDRESSES (Last Name First)	2. SECURED PARTIES (OR ASSIGNEES) & ADDRESSES	FOR FILING OFFICER (Date; Time, Number: & Office)
SHUCK IMPLEMENT CO. Route 3 Lawrence, KS 66044	LAWRENCE NATIONAL BANK 647 Massachusetts Street Lawrence, Kansas 66044	Douglas County Register Deed
3. This statement refers to original Financing Statement bearing File No		
DEBTOR SIGNATURES Debtor Signature required only when filling an Amendment	SECURED P Secured Party Signature always re	ARTY OR ASSIGNEE SIGNATURES
xx	Lawrence Nat	tional Bank • Lawrence, KS 66044
FORM UCC 2-STATEMENTS OF CONT	INUATION, RELEASE, LASSIGNMENT	reiling, Vice President/ge