Uniform Commercial Code — Financing Statement — Form UCC-1

1. Type form. 2. If space is inadequate continue on additional sheet. 3. Enclose filing fee,

4. Filings in the Secretary of State's Office must contain either the debtor's federal employer identification number or social security number.

5. 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: ACCT#011285-4		Debtor (if individu	Debtor (if individual, last name first) and address:	
SIMPSON,LINDA 1512 E 15TH S LAWRENCE KS 6	T			
FEIN or SS	N 509 - 56 - 3445	FEIN	or SSN	
Secured Party and address (there may be more than one): (Type information inside gray area)			For filing officer 9011350 FILED DOMESTIC MANAGEMENT	
THE ASSOCIATES 2329 S IOWA STE C&D LAWRENCE KS 66046			1995 SEP 22 PN 1: 03 SUB-LUSTIFIER REGISTER OF DEEDS	
3. Assignee and address if applicable				
4. Mark, if applicable: [] Produ	cts of collateral are also covered	[] The debtor	is a transmitting utility	
5. (a) This financing statement covers t	he following types (or items) of p	roperty: (Describe)		
SEE ATTACHED	SCHEDULE "A"			
(b) If collateral is crops, the above desc	ribed crops are growing or are to	be grown on: (Describ	pe real estate)	
(c) If applicable, the above (goods are financed at the wellhead or minehead			or the like, including oil and gas, or accounts will be eal estate)	
Name of record owner:				
location is changed b. [] Collateral is proceed c. [] Collateral as to whic	oject to a security interest in anot to this state. s of the original collateral in which	h a security interest was		
Office Signature of	<i>pso</i> Debtor	W/A	Signature of Secured Party (or assignee)	
Signature of	Debtor	S	Signature of Secured Party (or assignee)	