Uniform Commercial Code — Financing Statement — Form UCC-1

1. Type form. 2. If space is inadequate continue on additional sheet. 3. Enclose tiling lee.

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

	C -	Prepaid account number
Debtor (if individual, last name first) and address:	Debtor (if individual,	ast name first) and address:
AYLOR, BERYL D 708 E. 24TH AWRENCE, KS. 66046	TAYLOR, SHEILA K 1708 E. 24TH LAWRENCE, KS. 66046	
FEIN or SSN 5 1 1 - 5 2 -7 6 6 4	FEIN	or SSN 5 1 0 -6 6 8 8 6 2
Secured Party and address (there may be more than one): (Type information inside gray area)		For filing officer
BOATMEN'S FIRST NATIONAL OF KANSAS CITY P.O. BOX 419038 KANSAS CITY, MO. 64183		FILED DOUGLAS COUNTY KANSAS 1994 JUN 27 AM 10: 43 SUE NEUSTIFTER REGISTER OF DEEDS
3. Assignee and address if applicable		9008932
5. (a) This financing statement covers the following types (or items) of position of the control	0020	real estate)
(c) If applicable, the above (goods are to be come fixtures on:) (timber is financed at the wellhead or minehead of the well or mine located on:) (L	s standing on:) (minerals o egal description of real o	r the like, including oil and gas, or accounts will be
Name of record owner:		
6. If filing without debtor signature items a, b, c or d must be marked: a. [] Collateral already subject to a security interest in ano location is changed to this state. b. [] Collateral is proceeds of the original collateral in whice c. [] Collateral as to which the filing has lapsed. d. [] The filing covers collateral acquired after a change of	h a security interest was p	erfected
Benyl D. Taylor Signature of Debtor	Boatner	nature of Secured Party (or assignee)
Sheila K. Vay lor Signature of Debtor	- KMaras	Ollateral Coordinates nature of Secured Party (or assignee)