## 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#011245-0	Debtor (if individual, last name first) and address:	
THARP, CHRIS 413 ARROWHEAD DR LAWRENCE KS 66047		
FEIN or SSN 506 86 9702	FEIN	or SSN
		For filing officer
Secured Party and address (there may be more than one):     (Type information inside gray area)		9011193
THE ASSOCIATES		DOUGLAS COUNTY KANSAS
2329 S IOVA STE C&D LAVRENCE KS 66046		1995 AUG 25 PM 1: 32
IAWATHOE IN COCK		SUE LEUSTIFTER REGISTER OF DEEDS
3. Assignee and address if applicable		
4. Mark, if applicable: [ ] Products of collateral are also covered	[ ] The debtor is	a transmitting utility
5. (a) This financing statement covers the following types (or items) of pro-	operty: (Describe)	
SEE ATTACHED SCHEDULE "A"		
(b) If collateral is crops, the above described crops are growing or are to	be grown on: (Describe	real estate)
(c) If applicable, the above (goods are to become fixtures on:) (timber is financed at the wellhead or minehead of the well or mine located on:) (I		
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 anoth location is changed to this state.  b. [ ] Collateral is proceeds of the original collateral in which c. [ ] Collateral as to which the filing has lapsed.  d. [ ] The filing covers collateral acquired after a change of respectively.	a security interest was p	erfected
Signature of Debtor	. Sig	nature of Sectified Party (or assignee)
Signature of Debtor	Sig	nature of Secured Party (or assignee)