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 number or social security number.

TYLER, WARREN 1238 PRAIRIE LAWRENCE KS 66044 FEIN	Debtor (if individual, last name first) and address: Debtor (if individual, last name first)		ebtor (if individual, l	lual, last name first) and address:	
1238 PRATRIE LANRENCE KS 66044 LANRENCE KS 66044 2. Secured Party and address (there may be more than one): (Type Information Inside grey area) THE ASSOCIATES 2329 S TOWA STIE C&D LANRENCE KS 66046 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 property: (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 be come fixtures on:) (timber is standing on:) (minerals or the like, including oil and gas, or accounts will be financed at the wellhead or minehead of the well or mine located on:) (Legal description of real estate) Name of record owner: 5. If filing without debtor signature letens a, b, c or of must be marked: a [] Collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location is changed to this state. b [] Collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location is changed to this state. c) Collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location is changed to this state. c) Collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location is changed to this state. Signature of Secured Party (or assigned) Signature of Secured Party (or assigned)	ACCT#O	ACCT#010020-2		AMANDA	
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Prepaid account number