Uniform Commercial Code — Financing Statement — Form UCC-1

Type form. 2. If space is inadequate continue on additional sheet. 3. Enclose filing fee.
 A. Filings in the Secretary of State's Office must contain either the debtor's federal employer identification number or social security number.

			Prepaid account number
Debtor (if individual	I, last name first) and address:	Debtor (if individual, la	st name first) and address:
ACCT#010046-7 UNFRED,WAYNE 575 N 1600 RD LAWRENCE KS 66049		UNFRED, SANDRA 575 N 1600 RD LAWRENCE KS 66049	
FEIN	or SSN _512284622	FEIN	orssn 527 72 9989
2. Secured Party and	address (there may be more than one): tion inside gray area)	For filing officer 9 007512	
THE ASSOCIATES 2329 S IOWA STE C&D LAWRENCE KS 66046		OCT PLED TO THE	
3. Assignee and address if applicable			Sue Neusiner OF DELOS
			STATIOTIES
	e: [] Products of collateral are also covered statement covers the following types (or items) of particle. ATTACHED SCHEDULE "A"		transmitting utility
	ps, the above described crops are growing or are to	be grown on: (Describe re	eal estate)
(c) If applicable, the financed at the wellh	above (goods are to be come fixtures on:) (timber is sead or minehead of the well or mine located on:) (L	s standing on:) (minerals or egal description of real ea	the like, including oil and gas, or accounts will be tate)
Name of record own	er:		
a.[] Co k b.[] Co	btor signature items a, b, c or d must be marked: collateral already subject to a security interest in ano ocation is changed to this state. collateral is proceeds of the original collateral in whice collateral as to which the filing has lapsed. The filing covers collateral acquired after a change of	h a security interest was per	fected
Wagne	Only of	hlen	na V. Dehatt
Wayne . Sandra	Signature of Debtor O. Unfled		ature of Secured Party (or assignee)
1	Signature of Debtor	Sign	ature of Secured Party (or assignee)