

SCHEDULE A
SECURITY LISTING
(CHECK THE APPROPRIATE BOX(ES) AND DESCRIBE ITEM(S))

A. Purchase Money Security

(Any type of household goods or personal property may be listed in 1 & 2)

1. Direct Loan Purchase Money Security

(When proceeds are used to purchase specific items)

2. Security From

Prior ATP Acct. # _____

B. Non Purchase Money Security

Give complete description -- make/model.

<p>1. Television (Excess of 1) <u>RCA</u> \$ <u>500</u> <input type="checkbox"/></p> <p>2. Satellite Dish: _____ \$ _____ <input type="checkbox"/></p> <p>3. Radio (excess of 1): _____ \$ _____ <input type="checkbox"/></p> <p>Citizens Band Radio/Transmitter _____ \$ _____ <input type="checkbox"/></p> <p>Shortwave Band Receiver/Transmitter _____ \$ _____ <input type="checkbox"/></p> <p>4. Video Equipment: VCR/Disc Player <u>RCA</u> \$ <u>300</u> <input type="checkbox"/></p> <p>Video Game Computers (e.g., "Atari") _____ \$ _____ <input type="checkbox"/></p> <p>Video Games _____ \$ _____ <input type="checkbox"/></p> <p>Video Tapes _____ \$ <u>100</u> <input type="checkbox"/></p> <p>Video Camera _____ \$ _____ <input type="checkbox"/></p> <p>5. Home Computers: Equipment _____ \$ _____ <input type="checkbox"/></p> <p>Software _____ \$ _____ <input type="checkbox"/></p> <p>6. Stereo Equipment: Receiver/Amplifier _____ \$ _____ <input type="checkbox"/></p> <p>Compact Disc Player _____ \$ _____ <input type="checkbox"/></p> <p>Microphone _____ \$ _____ <input type="checkbox"/></p> <p>Turntable _____ \$ _____ <input type="checkbox"/></p> <p>Speakers _____ \$ _____ <input type="checkbox"/></p> <p>Cassette Player/Recorder _____ \$ _____ <input type="checkbox"/></p> <p>Compact Discs/Cassettes/Record Albums _____ \$ <u>50</u> <input type="checkbox"/></p> <p>7. Piano or Organ _____ \$ _____ <input type="checkbox"/></p> <p>8. Musical Instruments: Drums _____ \$ _____ <input type="checkbox"/></p> <p>Instruments _____ \$ _____ <input type="checkbox"/></p> <p>Guitars _____ \$ _____ <input type="checkbox"/></p> <p>Amplifiers _____ \$ _____ <input type="checkbox"/></p> <p>9. Sports Equipment: Bicycles _____ \$ _____ <input type="checkbox"/></p> <p>Fishing Equipment _____ \$ _____ <input type="checkbox"/></p> <p>Golf Clubs/Carts _____ \$ _____ <input type="checkbox"/></p> <p>Ping Pong/Pool Tables _____ \$ _____ <input type="checkbox"/></p> <p>ATV All Terrain Vehicle _____ \$ _____ <input type="checkbox"/></p> <p>Canoe/Rowboat _____ \$ _____ <input type="checkbox"/></p>	<p>Surfboards/Windsurfer Boards _____ \$ _____ <input type="checkbox"/></p> <p>Camping Equipment _____ \$ _____ <input type="checkbox"/></p> <p>Exercise Equipment _____ \$ _____ <input type="checkbox"/></p> <p>Ski Equipment _____ \$ _____ <input type="checkbox"/></p> <p>10. Rifles/Shotguns (no handguns): _____ \$ _____ <input type="checkbox"/></p> <p>11. Camera Equipment: Cameras _____ \$ _____ <input type="checkbox"/></p> <p>Lens _____ \$ _____ <input type="checkbox"/></p> <p>12. Telescope: _____ \$ _____ <input type="checkbox"/></p> <p>13. Microscope: _____ \$ _____ <input type="checkbox"/></p> <p>14. Binoculars: _____ \$ _____ <input type="checkbox"/></p> <p>15. Hand and Power Tools: Table/Radial Arm Saw _____ \$ _____ <input type="checkbox"/></p> <p>Lathe _____ \$ _____ <input type="checkbox"/></p> <p>Electric Sander/Grinder _____ \$ _____ <input type="checkbox"/></p> <p>Paint Sprayer _____ \$ _____ <input type="checkbox"/></p> <p>Drill and Bits _____ \$ _____ <input type="checkbox"/></p> <p>Chain or Circular Saw _____ \$ _____ <input type="checkbox"/></p> <p>Hand Tools _____ \$ _____ <input type="checkbox"/></p> <p>Ladders _____ \$ _____ <input type="checkbox"/></p> <p>16. Lawn and Garden Equipment: Lawn Mower _____ \$ _____ <input type="checkbox"/></p> <p>Weed Eater/Edger _____ \$ _____ <input type="checkbox"/></p> <p>Wheelbarrow _____ \$ _____ <input type="checkbox"/></p> <p>Snowblower _____ \$ _____ <input type="checkbox"/></p> <p>Garden Tools _____ \$ _____ <input type="checkbox"/></p> <p>17. Books/Encyclopedias: _____ \$ <u>600</u> <input type="checkbox"/></p> <p>18. Auto Repair Equipment: _____ \$ _____ <input type="checkbox"/></p> <p>19. Typewriter(s): _____ \$ _____ <input type="checkbox"/></p> <p>20. Clock(s): _____ \$ _____ <input type="checkbox"/></p> <p>21. Artworks: Paintings, Statues, Figurines, Wall Hangings, Pictures, Prints & Tapestries _____ \$ <u>800</u> <input type="checkbox"/></p>
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I (WE) ESTIMATE THE TOTAL REPLACEMENT COST NEW OF THE ABOVE ITEMS TO BE \$ 2250

Date 5/25/95

Borrower Debra A. Wigginton

Witness Joseph Simon

Borrower _____

Where Personal Property Insurance is purchased by the customer, the amount of coverage **may not exceed** the **lesser** of the value stated on the above listing or the Total of Payments of the loan. Review your State Insurance Guidelines for any exceptions.