All and the second					
				LAKE COUN	y as
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY			FILED FOR RECON		
A. NAME & PHONE OF CONTACT AT FILER [optional] Phone:(800) 331-3282 Fax: (818) 662		005 000759	20	05 AUG 22 PM	4:26
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)			20	V. 1100 W W W	
	510656 IPRI	INIEACCEPT	N	AICHAEL & PR	
LICC Direct Sorrigon	670023	on "		RECORDER	
UCC Direct Services P.O. Box 29071	679933	50			
Glendale, CA 91209-9071 ININ					
	FIXTU	RE _			
File with: Lake, IN		THE ABOVE S	PACE IS FOR F	ILING OFFICE USE ONLY	
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one	debtor name (	1a or 1b) - do not abbreviate or combine r	ames		
1a. ORGANIZATION'S NAME					
OR 1b. INDIVIDUAL'S LAST NAME	-	FIRST NAME	MIDDLE	NAME	SUFFIX
FARRELL		KRISTIE	М		
1c. MAILING ADDRESS 774 SURREY DR		LOWELL	STATE	POSTAL CODE 46356	COUNTRY
1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR	GANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	SANIZATIONAL ID #, if any	,
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - in	nsert only <u>one</u>	debtor name (2a or 2b) - do not abbreviate	or combine i	names	
2a. ORGANIZATION'S NAME					
OR 2b. INDIVIDUAL'S LAST NAME FARRELL		FIRST NAME STEVEN	MIDDLE	MIDDLE NAME SUFFIX	
2c. Malling Address 774 SURREY DR		LOWELL	STATE	POSTAL CODE 46356	COUNTRY
2d. SEE INSTRUCTIONS  ADD'L INFO RE ORGANIZATION DEBTOR  ADD'L INFO RE ORGANIZATION DEBTOR		2f. JURISDICTION OF ORGANIZATION	177	2g. ORGANIZATIONAL ID #, if any	
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGN	NEE of ASSIGN	IOR S/P) - insert only one secured party n	ame (3a or 3b	))	
3a. ORGANIZATION'S NAME Prime Acceptance Corp					
OR 3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME SUFFIX	
3c. MAILING ADDRESS	<del>-</del>	CITY	STATE	POSTAL CODE	COUNTRY
200 W Jackson Blvd #720		Chicago	· IL	60606	

5. ALTERNATIVE DESIGNATION [if applicable] LESSEE/LESSOR	CONSIGNEE/CONSIGNOR BAILEE/BAILOR	SELLER/BUYER AG. LIEN NON-UCC FILING
This FINANCING STATEMENT is to be filed [for record] (or record)     ESTATE RECORDS. Attach Addendum	ded) in the REAL 7. Check to REQUEST SEARCH REPORT	(T(S) on Debtor(s) All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA		Provide the second seco
6799330	62003	3171

4. This FINANCING STATEMENT covers the following collateral: WHOLE HOUSE WATER TREATMENT SYSTEM