This **FINANCING STATEMENT** is presented to a filing officer for filing pursuant to the Uniform Commercial Code:

3. Maturity date (if any):

1. Debtor(s) (Last Name First) and address(es)
WILLIAM R. BLAKESLEY d/b/a
THE MEDICINE SHOPPE
124 W. Main Street
Manchester, IA 52057-1534

2. Secured Party(ies) and address(es)
UNIVERSAL CHARGE ACCOUNTS, INC
3500 Lakevon Road
Pittsburgh, PA 15235

For Filing Officer (Date, Time, Number, and Filing Office)

'97 MAR 21 AM 10 25
DELAWARE COUNTY IOWA
G. PEYTON
RECORDER
#10.00
G127 93

4. This financing statement covers the following types (or items) of property:

Accounts receivable arising in the ordinary course of business of the Debtor, assigned or to be assigned to Secured Party.

5. Assignee(s) of Secured Party and Address(es)

This statement is filed without the debtor's signature to perfect a security interest in collateral. (check ☒ if so)
☐ already subject to a security interest in another jurisdiction when it was brought into this state.
☒ which is proceeds of the original collateral described above in which a security interest was perfected:

Filed with:

Check ☒ if covered: ☐ Proceeds of Collateral are also covered. ☐ Products of Collateral are also covered. No. of additional Sheets presented:

WILLIAM R. BLAKESLEY d/b/a
THE MEDICINE SHOPPE

By: _____ Owner
Signature(s) of Debtor(s) Title

UNIVERSAL CHARGE ACCOUNTS, INC.

By: _____
Signature(s) of Secured Party(ies) Title

(1) Filing Officer Copy-Alphabetical

STANDARD FORM - FORM UCC-1. (For Use In Most States)