

1. DEBTOR (LAST NAME FIRST) <b>HOFFMAN, JOHN E.</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>8780</b>	
1B. MAILING ADDRESS <b>1447 S. Riverview</b>		1C. CITY, STATE <b>Gardnerville, NV</b>	1D. ZIP CODE <b>89410</b>
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1F. CITY, STATE	1G. ZIP CODE
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) <b>HOFFMAN, SHARON</b>		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS <b>SAME AS ABOVE</b>		2C. CITY, STATE	2D. ZIP CODE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2F. CITY, STATE	2G. ZIP CODE
3. DEBTOR (S) TRADE NAME OR STYLE (IF ANY)		3A. FEDERAL TAX NO.	
4. ADDRESS OF DEBTOR (S) CHIEF PLACE OF BUSINESS (IF ANY)		4A. CITY, STATE	4B. ZIP CODE
5. SECURED PARTY NAME <b>BENEFICIAL FINANCE CO, OF CARSON</b> MAILING ADDRESS <b>P.O. BOX 996</b> CITY <b>Carson City</b> STATE <b>Nevada</b> ZIP CODE <b>89701</b>		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. <b>51-00</b>	
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	

7. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property on which growing or to be grown) *Check box which applies.*

**All of the household furniture and furnishings, electrical and gas appliances, including television sets, phonographs and record players, refrigerators, etc., and other personal property now owned or hereafter acquired in replacement thereof and now or hereafter located at the residence of the Debtors at the address given above.**

**Motor Vehicle** \_\_\_\_\_ YEAR \_\_\_\_\_ MAKE \_\_\_\_\_

\_\_\_\_\_

Real Property located at \_\_\_\_\_ STREET ADDRESS CITY \_\_\_\_\_  
more particularly described and referred to as Lot \_\_\_\_\_  
Block \_\_\_\_\_, \_\_\_\_\_ Subdivision recorded in Book No. \_\_\_\_\_  
of Deeds of \_\_\_\_\_ County at page \_\_\_\_\_

7A. Maximum amount of indebtedness to be secured at any one time (OPTIONAL.)  
**\$2500.00**

plus interest and service charges thereon as authorized by the Nevada Installment Loan and Finance Act.

8. Check  If Applicable

A  Proceeds of collateral are also covered

B  Products of collateral are also covered

C  Proceeds of above described original collateral in which a security interest was perfected

D  Collateral was brought into this State subject to security interest in another jurisdiction

9. DEBTORS (Date) **5/8** 19**73**

*John E. Hoffman*  
*Sharon L. Hoffman*

SECURED PARTY  
BENEFICIAL FINANCE CO. OF **Carson**  
By: *[Signature]* MANAGER

10. This Space for Use of Filing Officer  
(Date, Time, File Number and Filing Officer) **1377**

Recorded at Request of  
*Beneficial Finance*  
**MAY 30 1973**  
At **58** Min. Past **11 AM**  
Official Records of  
Douglas County, Nevada  
Patricia J. Stanley, Recorder  
By: *Patricia J. Stanley*  
**\$2.00 pd**  
BOOK **573** PAGE **1032** **66517**

11. Return Copy to

NAME **BENEFICIAL FINANCE CO. OF Carson**  
ADDRESS **P.O. BOX 996**  
CITY, STATE AND ZIP **Carson City, NV 89701**

(1) FILING OFFICER COPY—NUMERICAL

THIS SPACE FOR USE OF FILING OFFICER