

STATE OF NEVADA
UNIFORM COMMERCIAL CODE—FINANCING STATEMENT—FORM UCC-1
IMPORTANT—Read instructions on back before filling out form



This **FINANCING STATEMENT** is presented for filing pursuant to the Nevada Uniform Commercial Code

1. DEBTOR (LAST NAME FIRST) VIEIRA, ROBERT P.		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 2409	
1B. MAILING ADDRESS POB 1446		1C. CITY, STATE Zephyr Cove, Bv.	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 413 Arthur St.		1F. CITY, STATE Stateline, Nv.	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		2C. CITY, STATE	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2F. CITY, STATE	
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	
5. SECURED PARTY NAME AVCO Financial Svcs. MAILING ADDRESS POB 10010 CITY South Lake Tahoe STATE Ca. ZIP CODE 95731		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
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, if fixtures, include description of real property to which affixed or to be affixed; if oil, gas or minerals, include description of real property from which to be extracted).

- ALL of the household goods and furniture of every kind, nature and description now or hereafter located in or about Debtors' premises at their address above set forth or at the address to which said property may hereafter be removed.**
- Other (Describe):**

7A. MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL).
\$ _____

8. Check if Applicable

A <input type="checkbox"/> Proceeds of collateral are also covered	B <input type="checkbox"/> Products of collateral are also covered	C <input type="checkbox"/> Proceeds of above described original collateral in which a security interest was perfected	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction
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9. (Date) 10-24-77 19__

By: Robert P. Vieira (SIGNATURE(S) OF DEBTOR(S)) (TITLE) Robert P. Vieira

By: Bill Chase (SIGNATURE(S) OF SECURED PARTY(IES)) (TITLE) Asst. Manager

11. Return Copy to

NAME **AVCO FINANCIAL SERVICES**
 ADDRESS **POB 10010**
 CITY, STATE AND ZIP **South Lake Tahoe, Ca, 95731, NEV.**

10. THIS SPACE FOR USE OF FILING OFFICER (DATE, TIME, FILE NUMBER AND FILING OFFICER)

2952

REQUESTED BY Avco Financial Services
 # 4.00 pd
 17 NOV -3 PM 12:58
 PATRICIA J. WILLIAMS
 RECORDER
Donna Juchtyzer (Rep)

BOOK 1177 PAGE 268
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