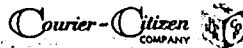


UNIFORM COMMERCIAL CODE—FINANCING STATEMENT—FORM UCC-1
IMPORTANT—Read instructions on back before filling out form



24-523 NEV. (1-67)

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

1. DEBTOR (LAST NAME FIRST) <i>Yaroslaski, Robert R. (Husband)</i>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 0521	
1B. MAILING ADDRESS <i>PO Box 1271</i>		1C. CITY, STATE <i>Minden, Nev</i>	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) <i>281 B Waterloo Ln</i>		1F. CITY, STATE <i>Hardnessville, Nev</i>	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) <i>Yaroslaski, Marie (wife)</i>		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 5578	
2B. MAILING ADDRESS <i>PO Box 1271</i>		2C. CITY, STATE <i>Minden, Nev</i>	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) <i>281 B Waterloo Ln</i>		2F. CITY, STATE <i>Hardnessville, Nev</i>	

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		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME <i>Pacific Finance</i>			
MAILING ADDRESS <i>Box 535</i>			
CITY <i>SPARKS</i> STATE <i>Nev</i> ZIP CODE <i>89431</i>			

6. ASSIGNEE OF SECURED PARTY (IF ANY)		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME <i>none</i>			
MAILING ADDRESS			
CITY		ZIP CODE	

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 Household goods now owned by the debtors

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

\$ _____

8. Check <input checked="" type="checkbox"/> 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) *1/26 1979*

By: *Robert R. Yaroslaski*
Robert R. Yaroslaski

By: *Marie E. Yaroslaski*
Marie E. Yaroslaski

By: *[Signature]*
Pacific Finance
Manager (TITLE)

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

03640

REQUESTED BY
Pacific Finance
IN OFFICIAL RECORDS OF
DOUGLAS CO. NEVADA
\$5.00 pd
1979 FEB -5 AM 11:21

MARIE A. RABEL (dep)
RECORDER
Conna Juchter

11. Return Copy to

NAME
Pacific Finance

ADDRESS
Box 535

CITY, STATE AND ZIP
Sparks, Nev 89431

THIS SPACE FOR USE OF FILING OFFICER

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29660