

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

FINANCIAL FORMS DEPARTMENT
DIAMOND INTERNATIONAL CORPORATION
P.O. BOX 4000 - RENO, NEVADA 89505

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

1. DEBTOR (LAST NAME FIRST) BASS, CHARLES M		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 9223	
1B. MAILING ADDRESS P.O. Box 2534		1C. CITY, STATE STATELINE NV	1D. ZIP CODE 89449
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 29 PONDEROSA		1F. CITY, STATE STATELINE NV	1G. ZIP CODE 89449
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) BASS, LORIE		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS SAME AS ABOVE		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 C.I.T FINANCIAL SERVICES, INC. MAILING ADDRESS P.O. BOX Z CITY SO. LAKE TAHOE, STATE CA, ZIP CODE 95705		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 and name of record owner of such real estate, if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which to be extracted.

-----ALL HOUSEHOLD GOODS NO EXCEPTIONS-----

7A. _____ SIGNATURE OF RECORD OWNER	7C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)			
7B. _____ (TYPE) RECORD OWNER OF REAL PROPERTY				
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
9. Check <input checked="" type="checkbox"/> If Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403			

10. (Date) DEC. 22 1980

By: *[Signature]*
CHARLES M BASS (SIGNATURE OF DEBTOR (S))

By: *[Signature]*
LORIE BASS (SIGNATURE OF SECURED PARTY (IES) MNGR. (TITLE))

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

04622

REQUESTED BY
C. J. J. Financial
IN OFFICIAL RECORDS OF
DOUGLAS CO. NEVADA
400 pd
1981 JAN -8 AM 11:17

MARIE A. RABEL
RECORDER

[Signature]

11. Return Copy to

NAME C.I.T FIANCIAL SERVICES, INC.
ADDRESS P.O. BOX Z
CITY, STATE AND ZIP SO. LAKE TAHOE, CA. 95705

THIS SPACE FOR USE OF FILING OFFICER

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