

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

STATE OF NEVADA

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

1. DEBTOR (LAST NAME FIRST) <b>ALLEN, DIANE AND CECIL</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO.	
1B. MAILING ADDRESS <b>910 ARROWHEAD DR.</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)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		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>NEVADA FIRST THRIFT</b> MAILING ADDRESS <b>P.O. BOX 1788</b> CITY <b>GARDNERVILLE</b> STATE <b>NEVADA</b> ZIP CODE <b>89410</b>		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. <b>88-0132848</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 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, furniture, objects of art, jewelry, furs, miscellaneous property and appliances unless considered fixtures located at Debtor's residence and/or other collateral described as set forth on Nevada First Thrift form 1-25 dated March 5, 1981 plus any and all additions and substitutions.**

7A. *Diane Allen*  
SIGNATURE OF RECORD OWNER

7B. *Cecil Allen*  
(TYPE) RECORD OWNER OF REAL PROPERTY

7C. \$ \_\_\_\_\_  
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
--	--	--	---	--

9. Check  If Applicable  DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

10. (Date) March 5, 1981

*Diane L. Allen*  
DIANE L. ALLEN

By: *Cecil Allen*  
SIGNATURE(S) OF DEBTOR(S) (TITLE)

By: *Jerry Smith*  
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE) **MANAGER**

12. This Space for Use of Filing Officer  
(Date, Time, File Number and Filing Officer)  
**04659**

11. **Return Copy to**

NAME **NEVADA FIRST THRIFT**  
ADDRESS **P.O. BOX 1788**  
CITY, STATE AND ZIP **GARDNERVILLE, NV. 89410**

REQUESTED BY *Nevada 1st Thrift*  
IN OFFICIAL RECORDS OF DOUGLAS CO. NEVADA  
\$ 4.00 pd.  
1981 MAR -6 AM 10:38

**MARIE A. RABEL**  
RECORDER

*(Rep) Cecil Allen*

THIS SPACE FOR USE OF FILING OFFICER

LIBER 381 PAGE 600 54131