

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) NEWMAN, PHILLIP L		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-5369	
1B. MAILING ADDRESS P O Box 10512		1C. CITY, STATE Zephyr Cove NV	1D. ZIP CODE 89448
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 399 Manzinita		1F. CITY, STATE Zephyr Cove NV	1G. ZIP CODE 89548
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 AVCO FINANCIAL SERVICES MAILING ADDRESS P O BOX 2262 CITY Reno STATE NV ZIP CODE 89505		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.

If checked at left, all household goods, furniture, appliances, and consumer goods of every kind and description owned at the time of the loan secured hereby, or at the time of any refinance or renewal thereof, or cash advanced under the loan agreement secured hereby, and located about the premises at the Debtor's residence (unless otherwise stated) or at any other location to which the goods may be moved.

Other (Describe):

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

8. Check <input checked="" type="checkbox"/> if Applicable	<input checked="" type="checkbox"/> Proceeds of collateral are also covered	<input checked="" type="checkbox"/> Products of collateral are also covered	<input type="checkbox"/> Proceeds of above described original collateral in which a security interest was perfected	<input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction
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9. File #10289

(Date) 10/20 1982

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

05362

By: Phillip L. Newman
Phillip Lance Newman
SIGNATURE(S) OF DEBTOR(S) (TITLE)

AVCO FINANCIAL SERVICES
By: [Signature]
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

11. Return Copy to

NAME
ADDRESS
CITY, STATE
AND ZIP

AVCO FINANCIAL SERVICES
P O BOX 2262
Reno, NV 89505

72832
LIBER 1182 PAGE 123
REQUESTED BY
Avco Financial Services
IN OFFICIAL RECORDS OF
DOUGLAS CO. NEVADA
\$ 4.00 fee
1982 NOV -3 AM 11:07
SUZANNE BEAUDREAU
RECORDER
[Signature]

THIS SPACE FOR USE OF FILING OFFICER