UNITORH COMMERCIAL CODE-FORM UCC-2

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#51				No.	•
	EMENT is presented for filing pure	suant to the Nevada Uni	form Comme	ercial Code	
1. FILE NO. OF ORIG. FINANCING STATEMENT	STATEMENT		STATEMENT	1C. FLACE OF FILING ORIG. FINANCING	
03472	2 09/07/78 10/10/78			Douglas	
2. DEBTOR (LAST NAME FIRST)				/	TY OR FEDERAL TAX NO.
ROBINSON: James S. &	Mona Lisa	· · · · · · · · · · · · · · · · · · ·		34	.66
28. MAILING ADDRESS		2C. CITY, STATE		\ \	2D. ZIP CODE
P.O. Box 1149		Gardnervi	.lle.NV.	_ \ \	89410
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)			3A. SOCIAL SECURIT	TY OR FEDERAL TAX NO.
3B. MAILING ADDRESS		1 20		<u> </u>	1 25
DB. MAILING ADDRESS		3C. CITY, STATE		\ \	3D. ZIP CODE
4. SECURED PARTY				4A. SOCIAL SECURIT	Y NO. FED. TAY NO.
NAME BENEFICIAL FINANCE CO, OF				OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESSP.O. Box				\	
CITY Reno.	*TATE Nevada	ZIP CODE	89_505	51-00 _	
5. ASSIGNEE OF SECURED PARTY	IF ANY)			5A. SOCIAL SECURIT	
HAME				OR BANK TRANS	IT AND A.B.A. NO.
MAILING ADDRESS	/				
CITY	STATE	ZIP CODE	_\		
	original Financing Statement betwe				
	is continued. If collateral is crops of erty on which growing or to be grow				
RELEASE—From the col	lateral described in the Financing escribed in Item 7 below.	Statement bearing the f	ile number :	shown above, th	e Secured Party
	cured Party certifies that the Secure Financing Statement bearing the fil		. -		
	cured Party certifies that the Secu				
	le number shown above.	area rany no longer ele	iiiii a secoi	my microsi onde	me imanemg
	ancing Statement bearing the file quired on all amendments.)	number shown above	is amended	as set forth in	Item 7 below.
F OTHER					
7.					· · · · · · · · · · · · · · · · · · ·
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9.	^		9. This Spac	e for Use of Filing C	Officer
DEBTORS) &	(Date)	08/02/_19_82	(Dat	e, Time, Filing Office)
(James).	Notomon James S.	Robinson			
Mora H. Rol.		a Robinson			
191011x (N. KO)	THE TOTAL CONTRACTOR OF THE TOTAL CONTRACTOR OT THE TOTAL CONTRACTOR OF THE TOTAL CONTRACTOR OT THE TOTAL CONTRACTOR OF THE TO	L.M. TERRON			
SECURED PARTY	/ /				
BENEFICIAL FINANCE CO. OFN	evada				
			,	REQUESTED	BY,
By: T.B. Springer:	MANAGER PAINC	1.0	40	renedició	1 Finance
10.	MANAGER 7		R		IRDS OF
• • •	Return Copy to		!	DOUGLAS CO. NE	
	W 2		រព្ធន	OEC 17 AM	
NAME BENEFICIAL FINANCE CO			1307	LUWST HI	10. 01
ADDRESS P.O. Box 1989 CITY, STATE Pone NV 80			SI.	IZANNE BEAU	IDREAU
AND ZIP Reno, NV. 89	5 ∪5	1]	RECORDE	-
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(1) FILING OFFICER COPY-NUMERICAL	L	LIRES 1 282 PAGE 11	162	vac p	The state of
	CC.2 736 - TERM 63472 Approved by the S.	CIDEN TEGETAULT	-U~	Λ	rep.
UNITORN COMMERCIAL CODE-FORM UC	CC-2 73C Approved by the S	ecretary of State		STANDARD FORM-	-FILING FEE \$2.00