

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

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

1. DEBTOR (LAST NAME FIRST) ASBURY JOHN AND VIRGINIA HIS WIFE		1A. SOC. SEC. OR FED. TAX NO.
1B. 260 TOLER	1C. CITY, STATE GARDNERVILLE NEVADA	1D. ZIP CODE 89423
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1F. CITY, STATE
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOC. SEC. OR FED. TAX NO.
2B. MAILING ADDRESS		2C. CITY, STATE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2F. CITY, STATE
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
5. SECURED PARTY NAME ASSOC FIN SERV OF NEVADA INC. MAILING ADDRESS PO BOX 7360 CITY RENO NEVADA 89510 STATE _____ ZIP CODE _____		5A. SOC. SEC. NO., FED. TAX NO. OR BANK TRANSIT & A B A. NO.
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME _____ MAILING ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____		6A. SOC. SEC. NO. FED. TAX NO. OR BANK TRANSIT & 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, 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).

SECURITY LISTED ON SCHEDULE "A"

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

8. Check if Applicable

A <input checked="" 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) 4/14/83 19__

JOHN AND VIRGINIA ASBURY

By: *John L. Asbury* x *Virginia R. Asbury*
 SIGNATURE(S) OF DEBTOR(S) (TITLE)

ASSOC FIN SERV OF NEVADA INC.

By: _____ AGENT
 SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

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

05175

11. Return Copy to

NAME **ASSOC FIN SERV OF NEVADA INC.**

ADDRESS **PO BOX 7360**

CITY, STATE AND ZIP **RENO NEVADA 89510**

078847

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THIS SPACE FOR USE OF FILING OFFICER

SECURITY LISTING

J. L. Ashbury
 BORROWER ADDRESS DATE 4-14-83

NO.	ARTICLE	COLOR, MAKE & DESCRIPTION	NO.	ARTICLE	COLOR, MAKE & DESCRIPTION
1	Refrigerator	green yellow		Piano	
1	Range	green		Rugs	wall to wall carpet, blue
1	Dishwasher	green	2	Bedroom Set	1 maple
1	dining room, Binette Set	Maple	3	Beds	2 double sets 1 twin set
	Freezer			Bunk Beds	
1	Washer	yellow	3	Chests	2 blue 1 maple
1	Dryer	white		Cedar Chest	
	Dining Room Set		1	Sewing Machine	Emdeko
1	Living Room Set	green and white		Air Conditioner	
1	Occasional Chair	black mangohide 1 maple	1	Vacuum Cleaner	Sunbeam Chemister
2	Coffee Table	1 chrome & glass	1	Power Mower	K Mart
4	End Tables	3 maple 1 chrome & glass	3	Brown leather bar stools	
5	Lamps				
1	T.V. Set 25 Inch	yxith			
1	Stereo or HIFI	Superscope			
1	Radio	clock			

I/We estimate the value of above goods furniture, and appliances to be \$ _____

The above articles insured with State Farm Homeowners Policy
 (Name of Insurance Company)

Dave Card
 (For Associates)

Borrower S/ J. L. Ashbury
 Borrower S/ Virginia L. Ashbury

Verbal Direct

VEHICLE CHECK REPORT

DESCRIPTION

Make GMC Year 77 Model Suburban Cyl. 8 Body Type _____ Color green

Vehicle Identification # 1CL1472525204 License # DA 9017 State Nevada

Verified ID# on Auto Yes No Ran engine for mechanical condition Yes No

CONDITION*

Radiator 3 Body 9 Fenders 9 Paint 9 Interior 9 Upholstery 9 Motor 9

Glass 9 Grill 9 Chrome 9 Tires - RF 9 LF 9 RR 9 LR 9 Spare 9

Mileage _____ General Condition good Estimate Repairs Needed \$ _____

Checked and appraised by Dave Card Date 4-14-83

Average Cash Value (Bk) \$ _____ Quick Wholesale \$ _____

Our Appraisal \$ _____

*Indicate Condition by G for Good F for Fair P for Poor

camper shell
 not included
 IS EXTRA BOOK 078847
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Carol J. Ehart

Dep. BOOK

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