

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

STATE OF NEVADA

BANK AND BANKERS DIVISION
DIAMOND INTERNATIONAL CORPORATION
P.O. BOX 4000 - RENO, NEVADA 89503

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

1. DEBTOR (LAST NAME FIRST) PALMER, Cathy L.		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 7737	
1B. MAILING ADDRESS Rt. 2, Box 107		1C. CITY, STATE Gardnerville, NV	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1D. ZIP CODE 89410	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		1F. CITY, STATE	
2B. MAILING ADDRESS		1G. ZIP CODE	
2C. CITY, STATE		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2D. ZIP CODE	
2F. CITY, STATE		2G. ZIP CODE	
3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY) FROSTY STOP #1		3A. FEDERAL TAX NO.	
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY) 1387 Main Street		4A. CITY, STATE Gardnerville, NV	
4B. ZIP CODE 89510		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 41-0810538	
5. SECURED PARTY Superior Products Western Co. dba NAME Sierra Restaurant Supply MAILING ADDRESS P.O. Box 10170 CITY Reno STATE NV ZIP CODE 89510		6A. 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			

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.

(48) 8C899 Stack Chairs, Black
(12) 8X327 Complete Tables, 24 x 24

7A. RECORD OWNER OF REAL PROPERTY	7B. S	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. (Date) **September 30** 19**83**

FROSTY STOP #1

By: Cathy L. Palmer (SIGNATURE) OF DEBTOR(S) **Owner** (TITLE)

Superior Products Western Co. dba Sierra Restaurant Supply

By: Bonnie B. Probin (SIGNATURE) OF SECURED PARTY (IES) **Credit Mgr.** (TITLE)

11. **Return Copy to**
Superior Products Western Co. dba
 NAME **Sierra Restaurant Supply**
 ADDRESS **P.O. Box 10170**
 CITY, STATE AND ZIP **Reno, NV 89510**

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

05593

REQUESTED BY
Superior Products
 BY OFFICIAL RECORDS OF
 DOUGLAS CO. NEVADA
 \$5.00 fee
1983 OCT 20 PM 12:03

SUZANNE BLAUDREAU
 RECORDER **089819**

Betty Herdon
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THIS SPACE FOR USE OF FILING OFFICER