

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

1. DEBTOR (LAST NAME FIRST) Velasco, Marguerite		1A. SOCIAL SECURITY OR FEDERAL TAX NO. ██████████-3516	
1B. MAILING ADDRESS P. O. Box 4712		1C. CITY, STATE Stateline, NV	1D. ZIP CODE 89449
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 169 Pine Drive		1F. CITY, STATE Stateline, NV	1G. ZIP CODE 89449
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Braden, Gary R.		2A. SOCIAL SECURITY OR FEDERAL TAX NO. 545-86-2881	
2B. MAILING ADDRESS Same		2C. CITY, STATE Same	2D. ZIP CODE 89449
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) Same		2F. CITY, STATE Same	2G. ZIP CODE 89449
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 BENEFICIAL FINANCE CO. OF NORTHERN CALIFORNIA MAILING ADDRESS P. O. BOX 9112 CITY South Lake Tahoe STATE Calif. ZIP CODE 95731		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.

All consumer household goods

7A. _____ SIGNATURE OF RECORD OWNER	7C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)			
7B. _____ (TYPE) RECORD OWNER OF REAL PROPERTY				
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 <input checked="" type="checkbox"/> if Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403			

10. (Date) October 12, 1983

Marguerite Velasco and Gary Braden

By: Marguerite Velasco / Gary R. Braden
SIGNATURE(S) OF DEBTOR(S) (TITLE)

Beneficial Finance Co. California
John F. Cartwright, Manager

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

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

05599

REQUESTED BY
Beneficial Finance Co.
 FEDERAL RECORDS
 DOUGLAS CO. NEVADA
 \$5.00 fl.

1983 OCT 24 AM 11:46

SUZANNE BEAUDREAU
 RECORDER

089948

Betty Herdon
 Dip BOOK 1083 PAGE 3316

11. **Return Copy to**

NAME	Beneficial Finance Co. of No. Calif.
ADDRESS	P. O. BOX 9112
CITY, STATE AND ZIP	So. Lake Tahoe, Ca. 95731

THIS SPACE FOR USE OF FILING OFFICER