

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) Stuparich, G. Nicholas		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-1786	
1B. MAILING ADDRESS P. O. Box 1806		1C. CITY, STATE Gardnerville, Nevada	1D. ZIP CODE 89410
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 1290 Hematite		1F. CITY, STATE Wellington, Nevada	1G. ZIP CODE
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Stuparich, D. Flynn		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS same as above		2C. CITY, STATE	2D. ZIP CODE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) same as above		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		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME	Norwest Financial Nevada, Inc.		
MAILING ADDRESS	P. O. Box 2549		
CITY	Carson City	STATE	Nevada
		ZIP CODE	89702
6. ASSIGNEE OF SECURED PARTY (IF ANY)		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
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, 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).

THE PARAGRAPHS CHECKED BELOW DESCRIBE THE PROPERTY COVERED BY THIS FINANCING STATEMENT:

(a) All of debtors' household goods and furniture of every kind, nature and description now located in or about debtors' premises at their address set forth above.

(b) The following property located in or about debtors' premises at their address set forth above:

7A. 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
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9. (Date) February 27 19 84

By: G. Nicholas Stuparich D. Flynn Stuparich
SIGNATURE(S) OF DEBTOR(S) TITLE

By: Phyllis Langlois, CSR
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

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

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REQUESTED BY
Norwest Financial
 IN OFFICIAL RECORDS OF
 DOUGLAS CO. NEVADA
 \$ 5.00 pd
 1984 MAR -8 PH 4: 17

SUZANNE BEAUDREAU
 RECORDER

Carol Albert 097896
Dep

11. Return Copy to

NAME	Norwest Financial
ADDRESS	P. O. Box 2549
CITY, STATE AND ZIP	Carson City, NV 89702

THIS SPACE FOR USE OF FILING OFFICER