

**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) Martin, Michael W.		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-6936	
1B. MAILING ADDRESS P. O. Box 1906		1C. CITY, STATE Gardnerville, Nevada	1D. ZIP CODE 89410
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 1385 Kitty Hawk		1F. CITY, STATE Gardnerville, Nevada	1G. ZIP CODE 89410
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) None		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		2C. CITY, STATE	2D. ZIP CODE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		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 NAME Norwest Financial Nevada, Inc. MAILING ADDRESS P. O. Box 2549 CITY Carson City STATE Nevada ZIP CODE 89702		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, 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)  
 \$ \_\_\_\_\_

B Check  If Applicable    A  Proceeds of collateral are also covered    B  Products of collateral are also covered    C  Proceeds of above described original collateral in which a security interest was perfected    D  Collateral was brought into this State subject to security interest in another jurisdiction

9. (Date) March 7 19 84  
 By: Michael W. Martin  
 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)  
**05714**  
 REQUESTED BY  
*Norwest Financial*  
 IN OFFICIAL RECORDS OF  
 DOUGLAS CO. NEVADA  
*\$5.00 pd.*  
 1984 MAR 19 AM 10:12  
 SUZANNE BEAUDREAU  
 RECORDER  
*Carol P. [Signature]* 098368  
 SEP 200K 384 PAGE 1681  
 STANDARD FORM—FILING FEE \$2.00

11. Return Copy to  
 NAME  Norwest Financial Nevada, Inc.  
 ADDRESS P. O. Box 2549  
 CITY, STATE AND ZIP Carson City, NV 89702

THIS SPACE FOR USE OF FILING OFFICER