

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

1. FILE NO. OF ORIG. FINANCING STATEMENT 04595	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT December 23, 1980	1B. DATE OF ORIG. FINANCING STATEMENT 9/23/80	1C. PLACE OF FILING ORIG. FINANCING STATEMENT DOUGLAS COUNTY, NV
2. DEBTOR (LAST NAME FIRST) BOHLER, STEVEN A.		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS P.O. BOX 1604		2C. CITY, STATE MINDEN, NV	2D. ZIP CODE 89423
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) NONE		3A. SOCIAL SECURITY OR FEDERAL TAX NO.	
3B. MAILING ADDRESS		3C. CITY STATE	3D. ZIP CODE
4. SECURED PARTY NAME DIAL FINANCE CO. OF NEVADA 112 MAILING ADDRESS P.O. BOX 2549 CITY CARSON CITY STATE NEVADA ZIP CODE 89701			4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE			5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
6. <input type="checkbox"/> CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, check here <input type="checkbox"/> and insert description of real property on which growing or to be grown in Item 7 below.			
<input type="checkbox"/> RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 7 below.			
<input type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.			
<input checked="" type="checkbox"/> TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.			
<input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor required on all amendments.)			
<input type="checkbox"/> OTHER			

7. THIS SPACE FOR USE OF FILING OFFICER

8. (Date) March 7, 19 84

By: \_\_\_\_\_ (TITLE)

By: Phyllis Langlois, CSR Phyllis Langlois (TITLE)

9. This Space for Use of Filing Officer (Date, Time, Filing Office)

REQUESTED BY  
Norwest Financial  
IN OFFICIAL RECORDS OF  
DOUGLAS CO. NEVADA  
Phyllis Langlois  
1984 MAR 19 AM 10:12  
SUZANNE BEAUDREAU  
RECORDER  
Phyllis Langlois 098369  
384 PAGE 1682  
STANDARD FORM-FILING FEE \$4.00

10. Return Copy to

NAME [ NORWEST FINANCIAL CO. OF NEVADA ]  
ADDRESS [ P.O. BOX 2549 ]  
CITY, STATE [ CARSON CITY, NV 89702 ]  
AND ZIP [ ]