

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

1. FILE NO. OF ORIG. FINANCING STATEMENT 04327	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT April 24, 1980	1B. DATE OF ORIG. FINANCING STATEMENT January 28, 1980	1C. PLACE OF FILING ORIG. FINANCING STATEMENT DOUGLAS, NV
2. DEBTOR (LAST NAME FIRST) GOLDBERG, STEPHEN H.		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS RTE 1 BOX 259		2C. CITY, STATE GARDNERVILLE, NV	2D. ZIP CODE 89410
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 COMPANY OF NV 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			

THIS SPACE FOR USE OF FILING OFFICER

8. (Date) March 9, 1984

By: SIGNATURE(S) OF DEBTOR(S) (TITLE)

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

10. Return Copy to

NAME NORWEST FINANCIAL COMPANY OF NV, INC.

ADDRESS P. O. BOX 2549

CITY, STATE CARSON CITY, NV 89702

AND ZIP

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

REQUESTED BY
Norwest Financial
 IN OFFICIAL RECORDS OF
 DOUGLAS CO. NEVADA
 \$4.00 pd
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SUZANNE BEAUDREAU RECORDER

Suzanne Beaudreau 098370
 S.p. BOOK 384 PAGE 1683
 STANDARD FORM-FILING FEE \$4.00

(1) Filing Officer Copy - Numerical