This FINA	NCING STATEMENT is presented	for filing pursuant to the Nevada L	Iniform Commercial	Code
DEBTOR (LAST NAME FIRST)			1A. SOCIAL SECUI	RITY OR FEDERAL TAX NO.
	KLAND, DAVID	1C. CITY, STATE		1D. ZIF CODE
MAILING ADDRESS	2001	Stateline	Nee	89449
	OX 2981 INDIVIDUAL AND DIFFERENT THAN (+)	1F, CITY, STATE	) IIV 9	1G. ZIP CODE
1439 Palisades Circle		Gardnerville,	Nv.	89410
ADDITIONAL DEBTOR (IF ANY			2A. SOCIAL SECU	RITY OR FEDERAL TAX NO.
AND ADDRESS		2C. CITY, STATE		2D. ZIP CODE
MAILING ADDRESS			,	
RESIDENCE ADDRESS (IF AN	INDIVIDUAL AND DIFFERENT THAN 20)	2F. CITY, STATE	Λ	2G, ZIP CODE
DEBTOR(S) TRADE NAME OR	STYLE (IF ANY)		3A. FEDERAL	TAX NO.
				4B. ZIP CODE
ADDRESS OF DEBTOR(S) CH	IEF PLACE OF BUSINESS (IF ANY)	4A. CITY, STATE	\	4B. 2IF CODE
SECURED PARTY				RITY NO., FEDERAL TAX TRANSIT AND A.B.A. NO.
NAME	NEVADA FIRST THRIFT	I	\	\
MAILING ADDRESS	P.O BOX 1788		0/10	1 2007 0
ASSIGNEE OF SECURED PAR	Gardnerville STATE No	evada zip code 8	GA. SOCIAL SECT	132848 JRITY HO. FEDERAL TAX
	II ME ANTE		HO. OR BANK	; TRANSIT AND A.B.A. NO.
NAME MAILING ADDRESS				_ \
CITY	STATE	ZIP CODE		
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Approved by the Nevada Secretary of State

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