

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) ROY TESTER DBA NEVADA WEST COMPANY		1A. SOCIAL SECURITY OR FEDERAL TAX NO.
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1B. MAILING ADDRESS 1356 Toiyabe	1C. CITY, STATE Gardnerville, NV	1D. ZIP CODE 89410
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1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)	1F. CITY, STATE	1G. ZIP CODE
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2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.
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2B. MAILING ADDRESS	2C. CITY, STATE	2D. ZIP CODE
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2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)	2F. CITY, STATE	2G. ZIP CODE
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3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY) CROSSROADS LOUNGE	3A. FEDERAL TAX NO.
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4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY) P.O. box 1717	4A. CITY, STATE Minden, NV	4B. ZIP CODE 89423
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5. SECURED PARTY NAME IGT MAILING ADDRESS 520 South Rock Blvd. CITY Reno STATE NV ZIP CODE 89502		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 88-0062109
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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.
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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 and name of record owner of such real estate, if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which to be extracted, and secured party has a security interest in:

- (2) 25¢ 701 Pokers, S/N 123342, 123460,
- (2) Loud Bowl Stands
- (2) Seats & pedestals,

And any other similar collateral hereafter acquired from IGT.

(SO #31544)

7A. _____ SIGNATURE OF RECORD OWNER	7C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)
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7B. _____ (TYPE) RECORD OWNER OF REAL PROPERTY

8. Check <input checked="" type="checkbox"/> if Applicable	A <input checked="" 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. Check <input checked="" type="checkbox"/> if Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403
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10. _____ (Date) <u>8/22</u> 19 <u>81</u>	12. This Space for Use of Filing Officer (Date, Time, File Number and Filing Officer)
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ROY TESTER DBA NEVADA WEST COMPANY		REQUESTED BY <u>[Signature]</u> IN OFFICIAL RECORDS OF FEDERAL BUREAU OF INVESTIGATION
By: <u>[Signature]</u> IGT	(TITLE) Roy Tester	
By: <u>[Signature]</u> Credit Manager		'84 AUG 27 AIO:41 SUZANNE BEAUDREAU RECORDER \$5.00 PAID <u>[Signature]</u> DEPUTY
(TITLE) William C. Thomas		

11. Return Copy to
NAME Bill Thomas
ADDRESS IGT
CITY, STATE AND ZIP 520 South Rock Blvd. Reno, NV 89502

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BOOK 884 PAGE 2668

(1) FILING OFFICE COPY - AUTHENTICATED

THIS SPACE FOR USE OF FILING OFFICER