

IMPORTANT-Read instructions on back before filling out form

STATE OF NEVADA

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

1. DEBTOR (LAST NAME FIRST) WHITE, KIMBERLY A		1A. SOCIAL SECURITY OR FEDERAL TAX NO [REDACTED]-6571	
1B. MAILING ADDRESS P O Box 2174		1C. CITY, STATE Gardnerville NV	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1a)		1D. ZIP CODE 89410	
		1F. CITY, STATE	
		1G. ZIP CODE	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO	
2B. MAILING ADDRESS		2C. CITY, STATE	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2a)		2D. ZIP CODE	
		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 AVCO FINANCIAL SERVICES MAILING ADDRESS P O BOX 2262 CITY Reno STATE NV ZIP CODE 89505		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 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.

If checked at left, all household goods, furniture, appliances, and consumer goods of every kind and description owned at the time of the loan secured hereby, or at the time of any refinance or renewal thereof, or cash advanced under the loan agreement secured hereby, and located about the premises at the Debtor's residence (unless otherwise stated) or at any other location to which the goods may be moved.

Other (Describe):

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

B. Check <input checked="" type="checkbox"/> if Applicable	A. <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B. <input checked="" 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. file #12561 (Date) 8-27 19 84

Kimberly A White
KIMBERLY A WHITE
By: _____ (TITLE)
SIGNATURE(S) OF DEBTOR(S)

AVCO FINANCIAL SERVICES
By: *J Thompson*
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

10. This Space for Use of Filing Officer (Date, Time, File Number and Filing Officer)

05872

REQUESTED BY *Avco Financial Services* IN OFFICIAL RECORDS OF DEPT. OF REVENUE, NEVADA

'84 AUG 28 10:32

SUZANNE BEAUDREAU RECORDER

\$500. PAID *Ch* DEPUTY

11. Return Copy to

NAME AVCO FINANCIAL SERVICES
ADDRESS P O BOX 2262
CITY, STATE Reno, NV 89505
AND ZIP

105747 BOOK 884 PAGE 2718

THIS SPACE FOR USE OF FILING OFFICER