STATE OF NEVADA . . UNIFORM COMMERCIAL CODE—FINANCING STATEMENT—FORM UCC-1 IMPORTANT—Read instructions on back before filling out form

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UNIFORM COMMERCIAL CODE-FORM UCC-1

This FINANCING STATEMENT is presented for filing p 1. DEBTOR (LABT NAME FIRST)	CITTORI TO IND THE THOR	1A. SOCIAL SECURITY	
Shelley, Forrest O.		094	
B. MAILING ADDRESS	IC. CITY, STATE	1 07,	1D. ZIP CODE
P. O. Box 1873	Gardnerville, N	evada	89410
E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 18)	1F. CITY, STATE		1G. ZIP CODE
1354 El Dorado #G	Gardnerville, 1	evada	89410
. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOCIAL SECURITY	
Shelley, Margaret			
B. MAILING ADDRESS	2C. CITY, STATE		2D. ZIP CODE
SAME LE. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 20)	2F. CITY, STATE		2G. ZIP CODE
,	ar. Gill, Sixis	\ \	1.0. 2.7 0000
SAME . DEBTOR(S) TRADE NAME OR STYLE (IF ANY)		3A. FEDERAL TAX N	<u>.</u>
		\ \	
. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)	4A. CITY, STATE		4B. ZIP CODE
. SECURED PARTY		1 5A. SOCIAL SECURITY	NO., FEDERAL TAX
Norwest Financial Nevada, Inc.		NO. OR BANK TRAI	ISIT AND A.B.A. NO.
MAILING ADDRESS P. O. Box 25/19			1
city Carson City STATE Nevada	ZIP CODE 89702		
ASSIGNEE OF SECURED PARTY (IF ANY)	ZIP CODE (05/02	GA. SOCIAL SECURITY	NO., FEDERAL TAX
			IST AND A.B.A. NO.
NAME	/ / /		\)
MAILING ADDRESS	< 1 1		
This FINANCING STATEMENT covers the following types or items o	ZIP CODE	<u> </u>	
(E)(a) All of debtors' household goods and furniture of every kind, nature and description now (b) The following property located in or about debtors' premises at their address set forth ab	\ \ \	their address set forth abo	re.
	v located in or about debtors' premises at sove:	their address set forth about aximum amount of indeb cured at any one time (O	otedness to be
	v located in or about debtors' premises at sove:	aximum amount of indet	otedness to be
Check A Proceeds of collateral are	sy located in or about debtors' premises at sove: 7A. A. S.	cured at any one time (O Collateral was brown subject to security in	otedness to be PTIONAL.) ght into this State
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Approved by the Secretary of State

STANDARD FORM-FILING FEE \$2.00