

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) CLARK, BRUCE A.		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-0721
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1B. MAILING ADDRESS P.O. Box 1923	1C. CITY, STATE MINDEN, NV.	1D. ZIP CODE 89423
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1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 1578 BROKEN ARROW	1F. CITY, STATE GARDNERVILLE, NV.	1G. ZIP CODE 89410
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2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) CLARK, PATRICIA D.		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-6516
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2B. MAILING ADDRESS P.O. Box 1923	2C. CITY, STATE MINDEN, NV.	2D. ZIP CODE 89423
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2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) 1578 Broken Arrow	2F. CITY, STATE GARDNERVILLE, NV.	2G. ZIP CODE 89410
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3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY)	3A. FEDERAL TAX NO.
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4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)	4A. CITY, STATE	4B. ZIP CODE
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5. SECURED PARTY NAME Nevada First Thrift MAILING ADDRESS P.O. Box 1788 CITY Gardnerville, STATE Nv. ZIP CODE 89410		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 88-0132848
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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.

All household goods, furniture, objects of art, jewelry, furs, miscellaneous property, and appliances unless considered fixtures located at Debtor's residence and/or other collateral described as set forth on Nevada First Thrift form 1-25 dated May 15, 1984, plus any and all additions and substitutions.

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

8. Check <input checked="" type="checkbox"/> if Applicable	A <input 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. <i>Bruce A. Clark</i> BRUCE A. CLARK By: _____ SIGNATURE(S) OF DEBTOR(S) (TITLE) <i>Patricia D. Clark</i> PATRICIA D. CLARK By: <i>Douglas M. Carr</i> Douglas M. Carr Manager (TITLE)	(Date) May 15, 1984
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12. This Space for Use of Filing Officer (Date, Time, File Number and Filing Officer) 06050
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11. Return Copy to NAME Nevada First Thrift ADDRESS P.O. Box 1788 CITY, STATE AND ZIP Gardnerville, Nv. 89410
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REQUESTED BY
Nevada First Thrift
IN OFFICIAL RECORDS OF
DOUGLAS CO. NEVADA

'85 MAR 21 10:56

SUZANNE BEAUDREAU
RECORDER
\$5.00 PAID *De* DEPUTY

THIS SPACE FOR USE OF FILING OFFICER