

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) HARVEY'S RESORT HOTEL		1A. SOCIAL SECURITY OR FEDERAL TAX NO.	
1B. MAILING ADDRESS P.O. Box 128		1C. CITY, STATE Stateline, NV	1D. ZIP CODE 89449
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1a)		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	2D. ZIP CODE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2a)		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 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 the following:

SEE SCHEDULE 'A' ATTACHED HERETO AND MADE A PART HEREOF BY REFERENCE.
DESCRIPTIONS OF EXACT MODELS AND SERIAL NUMBERS WILL BE ADDED BY A UCC-2 AMENDMENT.

and any other similar collateral hereinafter acquired from IGT.

7A. _____
SIGNATURE OF RECORD OWNER

7B. _____
(TYPE) RECORD OWNER OF REAL PROPERTY

7C. \$ _____
MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)

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) 7-8 1985

HARVEY'S RESORT HOTEL

By: [Signature] **U.P. CASINO OPS.**
SIGNATURE(S) OF DEBTOR (S) (TITLE)

IGT

By: [Signature] **Credit Mgr**
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

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

06129

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BOOK 785 PAGE 1253

11. Return Copy to

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

THIS SPACE FOR USE OF FILING OFFICER

HARVEY'S RESORT HOTEL
Schedule 'A'

Sales Orders 38595/38619/39163/39181/39182/39183

<u>Sales Order</u>	<u>Description</u>
38595	33 Fortune Reel Slots 33 Special Harvey's Stands
38619	54 Fortune Reel Slots 54 Special Harvey's Stands
39163	6 Fortune Reel Slots 1 - Six Hole Carousel 1 Rotating Sign
39181- A 39182- A 39183- A	46 54 Fortune Reel Slots 46 54 Special Harvey's Stands

1- 6 Hole Carousel
1- Rotating Sign



REQUESTED BY
IGT
IN OFFICIAL RECORDS OF
DOUGLAS COUNTY, NEVADA

'85 JUL 15 P4:08

SUZANNE BEAUDREAU
RECORDER
\$ 7.00 PAID JA DEPUTY

120184

BOOK 785 PAGE 1254