

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) JOHN'S TAHOE NUGGET		1A. SOCIAL SECURITY OR FEDERAL TAX NO.	
1B. MAILING ADDRESS P.O. Box 5910		1C. CITY, STATE Stateline, NV	1D. ZIP CODE 89449
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1b)		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 2b)		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	
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.

and secured party has a security interest in the following:
(10) \$1 3070-C Drop-In Bar Pokers
(1) Wood Bar

DESCRIPTIONS OF EXACT MODELS AND SERIAL NUMBERS WILL BE ADDED BY A UCC-2 AMENDMENT.
and any other similar collateral hereinafter acquired from IGT. SO 38762

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 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 if Applicable DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

10. _____ (Date) 7/9 BT

JOHN'S TAHOE NUGGET

By: [Signature] President (TITLE)

IGT

By: [Signature] Credit Manager (TITLE)

William G. Thomas (TITLE)

11. Return Copy to

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

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

06130

REQUESTED BY [Signature]

IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA

'85 JUL 16 AM 1:05

SUZANNE BEAUDREAU RECORDER

\$5.00 PAID [Signature] DEPUTY

BOOK 785 PAGE 1276

FILING FEES SEE INSTRUCTIONS

THIS SPACE FOR USE OF FILING OFFICER