

**UNIFORM COMMERCIAL CODE-FINANCING STATEMENT-FORM UCC-1**  
**IMPORTANT-Read instructions on back before filling out form**

FINANCIAL FORMS DEPARTMENT  
 DIAMOND INTERNATIONAL CORPORATION  
 P.O. BOX 4000 - RENO, NEVADA 89505

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

1. DEBTOR (LAST NAME FIRST) <b>CARLSON CONSTRUCTION, INC.</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>88-0139724</b>	
1B. MAILING ADDRESS <b>P. O. Box 685</b>		1C. CITY, STATE <b>Gardnerville, Nevada</b>	1D. ZIP CODE <b>89410</b>
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: <b>First Interstate Bank of Nevada, N.A.</b> MAILING ADDRESS: <b>P. O. Box 68</b> CITY: <b>Minden</b> STATE: <b>Nevada</b> ZIP CODE: <b>89423</b>		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. <b>94-41/1212</b>	
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.

1 - 1986 Galion 4-6 Ton Roller.

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 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
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	

10. \_\_\_\_\_ (Date) April 30, 1986

**CARLSON CONSTRUCTION, INC.**

By: Sharon M. Carlson Secretary  
SIGNATURE(S) OF DEBTOR(S) (TITLE)  
**Sharon M. Carlson**

By: M. L. Menesini Loan Officer  
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)  
**M. L. Menesini**

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

**06317**

REQUESTED BY  
J. I. B.  
 IN OFFICIAL RECORDS OF  
 DOUGLAS CO., NEVADA

**'86 MAY -5 AM 1:15**

SUZANNE BEAUDREAU  
 RECORDER

\$ 500 PAID JM DEPUTY

**134342**

**BOOK 586 PAGE 281**

11. **Return Copy to**

NAME: **First Interstate Bank of Nevada, N.A.**  
 ADDRESS: **P. O. Box 68**  
 CITY, STATE AND ZIP: **Minden, Nv. 89423**

THIS SPACE FOR USE OF FILING OFFICER