

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

FORM #M019-04-036 (6/84)

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

1. DEBTOR (LAST NAME FIRST) <b>BERES PRECISION INC., A NEVADA CORPORATION</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>88-0203623</b>	
1B. MAILING ADDRESS <b>P.O. BOX 2191</b>		1C. CITY, STATE <b>Gardnerville, Nevada</b>	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1D. ZIP CODE <b>89410</b>	
		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	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2D. ZIP CODE	
		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>Valley Bank of Nevada</b> MAILING ADDRESS: <b>P.O. BOX 1749</b> CITY: <b>Minden</b> STATE: <b>NV</b> ZIP CODE: <b>89423</b>		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. <b>94-72</b> <b>1224</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.

VMC 40 Milling Center Serial # 8607473

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 checked="" 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) September 4, 1986

Beres Precision Inc., a Nevada Corporation

By: David J. Beres SIGNATURE(S) OF DEBTOR(S) President (TITLE)

Valley Bank of Nevada

By: \_\_\_\_\_ SIGNATURE(S) OF SECURED PARTY (IES) \_\_\_\_\_ (TITLE)

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

**06389**

REQUESTED BY  
Valley Bank  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

'86 SEP -5 10:41

SUZANNE BEAUDREAU  
RECORDER

\$ 5- PAID RU DEPUTY **140439**

BOOK **986** PAGE **506**  
SEE INSTRUCTIONS

11.  Return Copy to

NAME: Valley Bank  
ADDRESS: P.O. BOX 1749  
CITY, STATE AND ZIP: Minden, NV 89423

THIS SPACE FOR USE OF FILING OFFICER