

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

1. FILE NO. OF ORIG. FINANCING STATEMENT 06405	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT September 26, 1986	1B. DATE OF ORIG. FINANCING STATEMENT August 22, 1986	1C. PLACE OF FILING ORIG. FINANCING STATEMENT Douglas County
2. DEBTOR (LAST NAME FIRST) Conrad, James W.		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-9430	
2B. MAILING ADDRESS P. O. Box 1296		2C. CITY, STATE Minden, Nevada	2D. ZIP CODE 89423
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Conrad, Donna K.		3A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-9009	
3B. MAILING ADDRESS same		3C. CITY, STATE	3D. ZIP CODE

4. SECURED PARTY NAME: Norwest Financial Nevada, Inc. MAILING ADDRESS: P. O. Box 2549 CITY: Carson City STATE: Nevada ZIP CODE: 89702		4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME: MAILING ADDRESS: CITY: STATE: ZIP CODE:		5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.

6. CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, check here and insert description of real property on which growing or to be grown in Item 7 below.

RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 7 below.

ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.

TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.

AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor required on all amendments.)

OTHER

7. _____

8. _____ (Date) March 5 1987

By: _____ (SIGNATURE(S) OF DEBTOR(S)) (TITLE)

By: Phyllis Langlois, CSR *Phyllis Langlois* (SIGNATURE(S) OF SECURED PARTY (IES)) (TITLE)

9. This Space for Use of Filing Officer
(Date, Time, Filing Office)

REQUESTED BY - *Norwest Financial Nevada*
IN OFFICIAL RECORDS OF DOUGLAS COUNTY, NEVADA

10. Return Copy to

NAME: Norwest Financial Nevada
ADDRESS: P. O. Box 2549,
CITY, STATE AND ZIP: Carson City, NV 89702

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SUZANNE CLADOREAU
RECORDER 151728
\$ 5- PAID *Mc* DEPUTY
NOV 387 PAGE 1944
STANDARD FORM—FILING FEE \$4.00

THIS SPACE FOR USE OF FILING OFFICER