

**STATE OF NEVADA**  
**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) <b>Perra, Raymond</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] -0923	
1B. MAILING ADDRESS <b>P.O. Box 1678</b>		1C. CITY, STATE <b>Minden, Nevada</b>	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) <b>875 Rubio Way</b>		1F. CITY, STATE <b>GARDNERVILLE, Nevada</b>	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) <b>Wendy Perra, Wendy</b>		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 8203	
2B. MAILING ADDRESS <b>P.O. Box 1678</b>		2C. CITY, STATE <b>Minden, Nevada</b>	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) <b>875 Rubio Way</b>		2F. CITY, STATE <b>GARDNERVILLE, Nevada</b>	
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 <del>XXXXX</del> <b>Norwest Financial Nevada, Inc.</b>		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS <b>P. O. Box 2549</b>			
CITY <b>Carson City</b> STATE <b>Nevada</b> ZIP CODE <b>89702</b>			
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS			
CITY STATE ZIP CODE			

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, if fixtures, include description of real property to which affixed or to be affixed; if oil, gas or minerals, include description of real property from which to be extracted).

THE PARAGRAPHS CHECKED BELOW DESCRIBE THE PROPERTY COVERED BY THIS FINANCING STATEMENT:

(a) All of debtors' household goods and furniture of every kind, nature and description now located in or about debtors' premises at their address set forth above.

(b) The following property located in or about debtors' premises at their address set forth above:

**Marin Spa Ser. #A1A0739**  
**Spa Top**

7A. Maximum amount of indebtedness to be secured at any one time (OPTIONAL)  
 \$ \_\_\_\_\_

8. Check  if Applicable    A  Proceeds of collateral are also covered    B  Products of collateral are also covered    C  Proceeds of above described original collateral in which a security interest was perfected    D  Collateral was brought into this State subject to security interest in another jurisdiction

9. (Date) **2-24** 19**87**

By: **Raymond Perra**  
 \_\_\_\_\_  
**Raymond K. Perra** (SIGNATURE(S) OF DEBTOR(S))    **Husband** (TITLE)

By: **Wendy Perra**  
 \_\_\_\_\_  
**Wendy K. Perra** (SIGNATURE(S) OF SECURED PARTY)    **Wife** (TITLE)

11. **Return Copy to**

NAME	<b>Norwest Financial</b>
ADDRESS	<b>P. O. Box 2549</b>
CITY, STATE AND ZIP	<b>Carson City, NV 89702</b>

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

**06520**

REQUESTED BY  
**Norwest Financial**  
 IN OFFICIAL RECORDS OF  
 DOUGLAS CO., NEVADA

**'87 JUN 22 P12:14**

SUZANNE BEAUDREAU  
 RECORDER

\$ **5** PAID BY **PH** DEPUTY

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 BOOK 687 PAGE 2550

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