

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

1. DEBTOR (LAST NAME FIRST) <b>TAYLOR, ROGER B</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>-1191</b>	
1B. MAILING ADDRESS <b>P.O. BOX 3445</b>		1C. CITY, STATE <b>STATELINE, NV.</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) <b>TAYLOR, CAROL A</b>		2A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>-4551</b>	
2B. MAILING ADDRESS <b>P.O. BOX 3445</b>		2C. CITY, STATE <b>STATELINE, NV.</b>	
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. <b>88-0132948</b>	
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4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)		4A. CITY, STATE	
		4B. ZIP CODE	

5. SECURED PARTY NAME <b>Nevada First Thrift Bank</b> MAILING ADDRESS <b>2446 Highway 50 E.</b> CITY <b>Carson City</b> STATE <b>Nv.</b> ZIP CODE <b>89701</b>		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
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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.	
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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.

Two old bedroom sets.

7A. _____ SIGNATURE OF RECORD OWNER	7C. <b>S</b> _____ 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 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 <input checked="" type="checkbox"/> if Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403
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10. (Date) <u>June 17</u> 19 <u>87</u>	12. This Space for Use of Filing Officer (Date, Time, File Number and Filing Officer) <b>06524</b>
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By: *Roger B Taylor*  
SIGNATURE(S) OF DEBTOR(S) (TITLE)

By: *Carol A Taylor*  
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

REQUESTED BY  
*M. Susan Thrift Bank*  
IN ORIGINAL RECORDS OF  
RECORDS OF NEVADA

'87 JUL -2 AIO:16

SUZANNE BORDREAU  
RECORDER

\$5.00 PAID *LD* DEPUTY

11.  **Return Copy to**

NAME **Nevada First Thrift Bank**  
ADDRESS **2446 Highway 50 E.**  
CITY, STATE AND ZIP **Carson City, Nv. 89701**

157616  
 787 PAGE 234  
 BOOK

THIS SPACE FOR USE OF FILING OFFICER

**Notice of Federal Tax Lien Under Internal Revenue Laws**

District <b>LAS VEGAS</b>	Serial Number <b>87005468 0000</b>	For Optional Use by Recording Office
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As provided by sections 6321, 6322, and 6323 of the Internal Revenue Code, notice is given that taxes (including interest and penalties) have been assessed against the following-named taxpayer. Demand for payment of this liability has been made, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.

Name of Taxpayer **JACK R GUYMON**


Residence  
**P O BOX 5446  
STATE LINE NV 89449**

**IMPORTANT RELEASE INFORMATION:** With respect to each assessment listed below, unless notice of lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

Kind of Tax <small>(a)</small>	Tax Period Ended <small>(b)</small>	Identifying Number <small>(c)</small>	Date of Assessment <small>(d)</small>	Last Day of Refiling <small>(e)</small>	Unpaid Balance of Assessment <small>(f)</small>
1040	12/31/84	██████████-6019	06/03/85	07/03/91	6005.23
RETURN TO: INTERNAL REVENUE SERVICE 300 LAS VEGAS BLVD. SO. LAS VEGAS, NV 89101					
Place of Filing <b>SPECIAL PROCEDURES FUNCTION-LIENS</b>  Douglas County Recorder Minden, Nevada					Total \$ 6005.23

**LAS VEGAS, NEVADA**

This notice was prepared and signed at \_\_\_\_\_, on this,  
 29 JUNE 87  
 the \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

Signature <b>K. L. CABLES</b> 	Title <b>CHIEF SPECIAL PROCEDURES</b>	<b>157617</b>
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(NOTE: Certificate of officer authorized by law to take acknowledgments is not essential to the validity of Notice of Federal Tax lien Rev. Rul. 71-466, 1971 - 2 C.B. 409)