## 5

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

STATE OF NEVADA

REORDER FROM
Registró, Inc.
514 PIERCE 51.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

| This in the control of the control o |  | niform Commercial Code  |
|--|--|---|
| 1 DEBTOR (LAST NAME FIRST)   | ing pursuant to the Nevada o   | 1A. SOCIAL SECURITY OR FEDERAL TAX NO.  |
| Thompkins, David   |  |   |
| 13. MAILING ADDRESS  | IC. CITY, STATE  | ID. ZIP CODE  |
| P.O. Box 73  | NILVOIEN   | 111   |
| E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1.)  | 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  |
| PE. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2.)   | 2F. CITY, STATE  | 2G, ZIP CODE  |
| 3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY)  |  | 3A. FEDERAL TAX NO.   |
| 1. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)   | 4A. CITY, STATE  | 4B, ZIP CODE  |
| 5. SECURED PARTY   |  | SA. SOCIAL SECURITY NO., FEDERAL TAX  |
| NAME TOUCHED, KALPIN   |  | NO. OR BANK TRANSIT AND A.B.A. NO.  |
| MAILING ADDRESS PO BOX 5000 STATE NO   | ZIP CODE)  | 441   |
| · ASSIGNEE OF SECURED PARTY (IF ANY)   | ZIP CODE()   | GA. SOCIAL SECURITY NO. FEDERAL TAX   |
| NAME MECHANICS' ACCEPTANCE CORP.   | ( )  | NO. OR BANK TRANSIT AND A.B. A. NO.   |
| MAILING ADDRESS 4403 Allen Road  |  | 224   |
|  | 211 3000   |   |
| 7. This FINANCING STATEMENT covers the following types or items of property<br>grown and name of record owner of such real estate, if fixtures, include descri   | (it crops or timber, include description of real property to which affix | on of real property on which growing or to be<br>sed 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.  |   |
| All tools, equipment and accessory items now owned   | I by Debtor for use in D   | ebtor's trade or business   |
| together with any and all similar tools, equipment   | and accessory items here   | after acquired.   |
|  |  |   |
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|  | . ) )  |   |
|  | / / /  | >   |
|  | \ \ \  |   |
|  | / /  |   |
| 7A. SIGNATURE OF RECORD OWNER  | \ \  |   |
| SIGNATURE OF RECORD OWNER  | 7C. S  | M AMOUNT OF INDERTEDNESS TO   |
| 7B   | BE SEC   | M AMOUNT OF INDEBTEDNESS TO<br>URED AT ANY ONE TIME (OPTIONAL)                                  |
| (TYPE) RECORD OWNER OF REAL PROPERTY   |  |   |
| 3. Check X A X Proceeds of collateral are B Products of collateral are   | Proceeds of above described original collateral in which                 | Collateral was brought into this State subject to security interest in another                  |
| Applicable also covered also covered   | a security interest was perfected  | jurisdiction  |
| - Check X  |  |   |
| If DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS   | 5 704.205 AND NRS 104.9403   |   |
| D  | 12. This   | Space for Use of Filing Officer   |
| (Date)   |  | me, File Number and Filing Officer)   |
| (Suro)   | . /  | ,   |
|  | ,  | 06535   |
|  |  |   |
| By: plue out   |  |   |
| SIGNATURE(S) OF DESTOR (S) DAVID THORIPMONS (TITLE)  |  | REQUESTED BY  |
|  |  | marco Joses   |
| IR OF  |  | IR OFFICIAL RECORDS OF DOUGLAS CO., NEVADA  |
| By: Tales D. (called)  |  | ger egents order to a trick   |
| 11. Return Copy to   | (TITLE)  | '87 JUL 23 P2:15  |
|  |  |   |
| MAME MECHANICS' ACCEPTANCE CORPORATION   | N I  | SUZANNE BEAUDREAU   |
| ADDRESS 4403 Allen Road  |  | RECORDER 1586'  |
| CITY, STATE Stow, Ohio 44224   |  | 55- PAID JU DEPUTY  |
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| <u>L_</u>  |  | 600K 787PAGE 289  |