

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) Freilick, Robert		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 1141	
1B. MAILING ADDRESS P. O. Box 2067		1C. CITY, STATE Minden, Nevada	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 2658 Wade		1F. CITY, STATE Minden, Nevada	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Freilick, Martha		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS same		2C. CITY, STATE	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) same		2F. CITY, STATE	
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	
5. SECURED PARTY NAME: Norwest Financial Nevada, Inc. MAILING ADDRESS: P. O. Box 2549 CITY: Carson City STATE: Nevada ZIP CODE: 89702		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
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, 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: <input checked="" type="checkbox"/> (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. <input checked="" type="checkbox"/> (b) The following property located in or about debtors' premises at their address set forth above: Waterbed complete, including 2 Pier cabs., light bridge hdbd F W Captains Ped., frame, liner, 3D lamp, bladder htr, deck			
8. Check <input checked="" type="checkbox"/> If Applicable			7A. Maximum amount of indebtedness to be secured at any one time (OPTIONAL) \$
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

9. (Date) June 18 19 87

By: Robert Freilick (Signature) Martha Freilick (Title)

By: Phyllis Langlois, CSR (Signature) Phyllis Langlois (Title)

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

06548

REQUESTED BY
Norwest Financial
 IN OFFICIAL RECORDS OF
 BOARDS AND COMMISSIONS
 NEVADA

'87 AUG 17 P2:02

SUZANNE BRADDEAU
 RECORDER
 \$ 5.00 PAID Me DEPUTY

160315
 BOOK **887** PAGE **1797**
 STANDARD FORM—FILING FEE \$2.00

11. **Return Copy to**

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

(1) Filing Officer Copy — Numerical

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Approved by the Secretary of State

THIS SPACE FOR USE OF FILING OFFICER