



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

FINANCIAL FORMS DEPARTMENT
SMURFIT DIAMOND PACKAGING CORP.

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

1. DEBTOR (LAST NAME FIRST) THEILEN, KYLE H.		1A. SOCIAL SECURITY OR FEDERAL TAX NO. ██████████-3812
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1B. MAILING ADDRESS 690 PINTO CR.	1C. CITY, STATE GARDNERVILLE, NV.	1D. ZIP CODE 89410
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1b)	1F. CITY, STATE	1G. ZIP CODE

2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) THEILEN, KRISTINE		2A. SOCIAL SECURITY OR FEDERAL TAX NO. ██████████-8413
2B. MAILING ADDRESS 690 PINTO CR.	2C. CITY, STATE GARDNERVILLE, NV.	2D. ZIP CODE 89410
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.	
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)	4A. CITY, STATE	4B. ZIP CODE

5. SECURED PARTY NAME: NEVADA FIRST BANK MAILING ADDRESS: P.O. BOX 1788 CITY: GARDNERVILLE STATE: NEVADA ZIP CODE: 89410	5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 88-0196792
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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.)

"ALL PERSONAL PROPERTY, FURNITURE, OBJECTS OF ART, JEWELRY, FURS, MISCELLANEOUS PROPERTY, AND APPLIANCES UNLESS CONSIDERED FIXTURES LOCATED AT DEBTOR'S RESIDENCE AND/OR OTHER COLLATERAL DESCRIBED ASSET FORTH ON NEVADA FIRST BANK FORM SCHEDULE A, DATED 12/10/87 PLUS ANY AND ALL ADDITIONS AND SUBSTITUTIONS.

7A. _____ SIGNATURE OF RECORD OWNER	7C. \$ _____ 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 if Applicable DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

10. _____ (Date) **DEC. 10** 19**87**

By: *Kyle H. Theilen*
KYLE H. THEILEN (TITLE)

By: *Kristine Theilen*
KRISTINE THEILEN (TITLE)

By: *Larry S. Lutrick*
LARRY S. LUTRICK (TITLE) **MANAGER**

12. This Space for Use of Filing Officer
(Date, Time, File Number and Filing Officer)
06637

RECORDED BY:
Nevada First Bank
IN THE PUBLIC RECORDS OF
CLERK OF SUPERIOR COURT
STATE OF NEVADA

'88 JAN -8 A9:09

SUZANNE B. RUBLEAU
RECORDER

500 *Bl* DEPUTY

11. **Return Copy to**

NAME: **NEVADA FIRST BANK**
ADDRESS: **P.O. BOX 1788**
CITY, STATE AND ZIP: **GARDNERVILLE, NV, 89410**

170461

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THIS SPACE FOR USE OF FILING OFFICER