

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) Gookin, William L.		1A. SOCIAL SECURITY OR FEDERAL TAX NO [REDACTED] 7942	
1B. MAILING ADDRESS Box 308		1C. CITY, STATE Minden, NV	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 768 Hornet		1F. CITY, STATE XXXXXXXXXX Gardnerville, NV	
1D. ZIP CODE 89423		1G. ZIP CODE 89410	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Gookin, Janet		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	
2D. ZIP CODE		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		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME Norwest Financial Nevada, Inc.			
MAILING ADDRESS P. O. Box 2549			
CITY Carson City STATE Nevada ZIP CODE 89702			
6. ASSIGNEE OF SECURED PARTY (IF ANY)		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME			
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:

Satellite system consisting of:
 10' wire yard dish
 Uniden 7000 receiver

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

\$ _____

B Check <input checked="" type="checkbox"/> if Applicable	A <input type="checkbox"/> Proceeds of collateral are also covered	D <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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THIS SPACE FOR USE OF FILING OFFICER

9. (Date) November 29 87

By: William Gookin Janet Gookin
SIGNATURE(S) OF DEBTOR(S) (TITLE)

By: Phyllis Langlois, CSR [Signature]
SIGNATURE(S) OF SECURED PARTY (S)

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

06643

Norwest Financial
IN THE COUNTY OF CLATSOP STATE OF OREGON

'88 JAN 11 AM 10:00
170574

188 PAGE 1146
 DEPUTY
 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	