FINANCIAL FORMS DEPARTMENT SMURFIT DIAMOND PACKAGING CORP.

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

This FINANCING STATEMENT is present	nted for filing pursuant			
1. DEBTOR (LAST NAME FIRST)			1A. SOCIAL SECURITY	
WENTZ MIKE T 18. MAILING ADDRESS	lic .	CITY, STATE		1D. ZIP CODE
964 ARROWHEAD		GARDNERVILLE	N11.7	89410
IE. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1	a) 1F.	CITY, STATE	NV NV	1G. ZIP CODE
		,		
SAME 2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)			2A. SOCIAL SECURITY	OR FEDERAL TAX HO
WENTZ TRISHA TOCCCO			\ \ \	
2B. MAILING ADDRESS	2c. (CITY, STATE	53068-695	2D, ZIP CODE
964 ARROWHEAD		GARDNERVILLE	. NV	00410
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2)	a) 2F.	CITY, STATE	, 100	89410 2G, ZIP CODE
SAME			\ \	\
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		48. ZIP CODE
	j		The state of the s	V
5. SECURED PARTY			5A. SOCIAL SECURITY	NO., FEDERAL TAX
NAME NEVADA FIRST BANK			NO. OR BANK TRA	MOI AND A.B.A. NO.
MAILING ADDRESS PO BOX 1788				1 1
CITY GARDNERVILLE NV STATE	NV /	ZIP CODER 9410		1 1
ASSIGNEE OF SECURED PARTY (IF ANY)		1310	GA. SOCIAL SECURITY	Y NO., FEDERAL TAX
NAME	((\	NO. OK BANK TRA	MISH AND A.B.A. NO.
MAILING ADDRESS]		_
CITY STATE	1 1	ZIP CODE	/	
7. This FINANCING STATEMENT covers the following types or items	of property (if crops or tim	ber include description	of real property on which	h growing or to be
grown and name of record owner of such real estate, if fixtures, it	include description of real pr	operty to which affixed		
of such real estate; if oil, gas or minerals, include description of re	al property from which to b	e extracted.		
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All household goods, furniture, obje	_		~	
and appliances unless considered fix	xtures located a	t Debtor's pl	ace of residen	ice
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