

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) Inmoor Fred K. 1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-7300

1B. MAILING ADDRESS P.O. Box 216 1C. CITY, STATE Zephyr Cove Nevada 1D. ZIP CODE 89448

1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 651 Marla Ln. Zephyr Cove Nevada 89448 1F. CITY, STATE zephyr Cove Nevada 1G. ZIP CODE 89448

2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) 2A. SOCIAL SECURITY OR FEDERAL TAX NO.

2B. MAILING ADDRESS 2C. CITY, STATE 2D. ZIP CODE

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 Frontier Savings Association 5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 88-0086667
MAILING ADDRESS P.O. Box 18405 (CB)
CITY Las Vegas STATE Nevada ZIP CODE 89114

6. ASSIGNEE OF SECURED PARTY (IF ANY)
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 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.

Property located at 651 Marla Ln. Zephyr Cove Nevada 89448

7A. Fred K. Inmoor
SIGNATURE OF RECORD OWNER

7C. \$ 6,038.00
MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)

7B. Fred K. Inmoor
(TYPE) RECORD OWNER OF REAL PROPERTY

8. Check If Applicable
A Proceeds of collateral are also covered
B Products of collateral are also covered
C Proceeds of above described original collateral in which a security interest was perfected
D Collateral was brought into this State subject to security interest in another jurisdiction

9. Check If Applicable
 DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

10. (Date) 3/24/1988 19

By: Fred K. Inmoor
SIGNATURE(S) OF DEBTOR(S) (TITLE)
Frontier Savings Association
By: Larry Booth AVP/Manager
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

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

06691

REQUESTED BY
Frontier Savings Assn.
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'88 MAR 29 A10:49

SUZANNE BEAUDREAU
RECORDER

175142

\$ 5.00 PAID [Signature] DEPUTY
CLERK 388 PAGE 3525

11. **Return Copy to**
NAME Frontier Savings Association
ADDRESS P.O. Box 18405 (CB)
CITY, STATE AND ZIP Las Vegas Nevada 89114

THIS SPACE FOR USE OF FILING OFFICER