

**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) <b>DENNIS PETERSON</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>[REDACTED]-4686</b>	
1B. MAILING ADDRESS <b>P.O. Box 1397</b>		1C. CITY, STATE <b>Gardnerville, NV.</b>	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1D. ZIP CODE <b>89410</b>	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		1F. CITY, STATE	
2A. SOCIAL SECURITY OR FEDERAL TAX NO.		1G. ZIP CODE	
2B. MAILING ADDRESS		2C. CITY, STATE	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2D. ZIP CODE	
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	
5. SECURED PARTY NAME: <b>NEVADA BANKING COMPANY</b> MAILING ADDRESS: <b>P.O. Box 1616</b> CITY: <b>Gardnerville</b> STATE: <b>Nevada</b> ZIP CODE: <b>89410</b>		4B. ZIP CODE	
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME: MAILING ADDRESS: CITY: STATE: ZIP CODE:		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. <b>94/161</b>	
		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 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.

- 1 Minolta 410Z Copier. Serial #1673445
- 1 Minolta A15 Auto Feeder
- 1 Minolta F15

7A. \_\_\_\_\_ SIGNATURE OF RECORD OWNER

7B. \_\_\_\_\_ (TYPE) RECORD OWNER OF REAL PROPERTY

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

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) August 9, 1988

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

**06764**

By: *Dennis Peterson* (SIGNATURE(S) OF DEBTOR (S)) Owner (TITLE)  
**Dennis Peterson**

By: \_\_\_\_\_ (SIGNATURE (S) OF SECURED PARTY (IES)) \_\_\_\_\_ (TITLE)

REQUESTED BY  
*Nevada Banking Co.*  
RECORDS OF  
NRS CO., NEVADA

'88 AUG 16 AIO :51

11. **Return Copy to**

NAME: **NEVADA BANKING COMPANY**  
ADDRESS: **P.O. Box 1616**  
CITY, STATE AND ZIP: **Gardnerville, NV. 89410**

SUZANNE BEAUDREAU  
RECORDER

*500* PAID *[Signature]* DEPUTY **184358**

BOOK **888** PAGE **2377**

THIS SPACE FOR USE OF FILING OFFICER