

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

REORDER FROM
Registre, Inc.
 514 PIERCE ST.
 P.O. BOX 218
 ANDOKA, MN. 55303
 (612) 421-1713

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

1. DEBTOR (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) CHICHESTER, ROSS J.		1A. FEDERAL TAX ID NO. [REDACTED]-6378		
1B. MAILING ADDRESS P. O. Box 884	1C. CITY, STATE Minden, Nevada	1D. ZIP CODE 89423		
1E. RESIDENCE ADDRESS 1613 Olua	1F. CITY, STATE Minden, Nevada	1G. ZIP CODE 89423		
2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) CHICHESTER, TEDDY J.		2A. FEDERAL TAX ID NO. [REDACTED]-5823		
2B. MAILING ADDRESS P. O. Box 884	2C. CITY, STATE Minden, Nevada	2D. ZIP CODE 89423		
2E. RESIDENCE ADDRESS 1613 Olua	2F. CITY, STATE Minden, Nevada	2G. ZIP CODE 89423		
3. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET				
4. SECURED PARTY NAME GEORGE F. WENNHOLD and CONSTANCE J. WENNHOLD MAILING ADDRESS P. O. Box 1554, Minden, Nevada 89423 CITY STATE ZIP CODE		4A. SOCIAL SECURITY NO. FEDERAL TAX ID NO. OR STATE TRANSIT AND BILLING NO. 535-44-9063		
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE		5A. SOCIAL SECURITY NO. FEDERAL TAX ID NO. OR STATE TRANSIT AND BILLING NO.		
6. 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 growing 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). 1982 Ford Econoline Van Vehicle I.D. No. Computer Cash Register Refrigeration equipment and all other personal property, removable fixtures and inventory (except as expressly reserved by oral agreement between Debtors and Secured Parties as Secured Parties' personal property) located in Bouquet & Bouquet, 1540 Hwy 395, Gardnerville, NV. 6A. <u>E. JAMES STRATTON</u> SIGNATURE OF RECORD OWNER 6B. _____ TYPE I RECORD OWNER OF REAL PROPERTY 6C. \$ <u>35,000.00</u> MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)				
7. Check <input checked="" type="checkbox"/> if Applicable	A <input checked="" 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 (Debtors Signature Not Required)	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction (Debtors Signature Not Required)
8. Check <input checked="" type="checkbox"/> if Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403			

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) August 1, 1988

By: Ross Chichester (SIGNATURE(S) OF DEBTOR(S)) Teddy J. Chichester (TITLE)
Ross Chichester Teddy J. Chichester
 TYPE NAME(S)

By: C. J. Wennhold (SIGNATURE(S) OF SECURED PARTY(IES)) G. F. Wennhold (TITLE)
C. J. WENNHOLD G. F. WENNHOLD
 TYPE NAME(S)

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

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George M. Keele
 RECORDS OF
 DOUGLAS CO. NEVADA

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 RECORDER
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10. **Return Copy to**

NAME George M. Keele, Esq.
 ADDRESS Sheerin, Walsh & Keele
 CITY, STATE AND ZIP P. O. Box 1327
Gardnerville, NV 89410