

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 02/1757MB

1. DEBTOR (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) WARD, Kenneth L.		1A. SOCIAL SECURITY OR FEDERAL TAX NO [REDACTED] 5234	
1B. MAILING ADDRESS P.O. Box 3785		1C. CITY, STATE Stateline, NV.	
1E. RESIDENCE ADDRESS Space 5, Kingsbury Mobile Home Park		1F. CITY, STATE Stateline, NV.	
		1D. ZIP CODE 89449	
		1G. ZIP CODE 89449	

2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) WARD, Susanna S. Ward		2A. SOCIAL SECURITY OR FEDERAL TAX NO [REDACTED] 1233	
2B. MAILING ADDRESS as shown above		2C. CITY, STATE	
2E. RESIDENCE ADDRESS as shown above		2F. CITY, STATE	
		2D. ZIP CODE	
		2G. ZIP CODE	

3. ADDITIONAL DEBTOR(S) ON ATTACHED SHEET

4. SECURED PARTY NAME WILLIAM W. SLOAN MAILING ADDRESS 6239 Parkhurst Drive CITY Goleta, STATE California ZIP CODE 93117		4A. SOCIAL SECURITY NO FEDERAL TAX NO OR BANK TRANSIT AND A B A. NO [REDACTED] 6245	
--	--	---	--

5. 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	
---	--	---	--

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).

1974 62x24 HILLCREST MOBILE HOME, SERIAL NO. SO17541012XU, located in space 5, Kingsbury Mobile Home Park

6A. _____
 SIGNATURE OF RECORD OWNER

6B. _____
 (TYPE) RECORD OWNER OF REAL PROPERTY

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

7. Check <input checked="" type="checkbox"/> if Applicable	A <input 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 if Applicable DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

9. (Date) _____ 19__

By: Kenneth L. Ward Susanna S. Ward
 SIGNATURE(S) OF DEBTOR(S) (TITLE)

Kenneth L. Ward Susanna S. Ward
 TYPE NAME(S)

By: William W. Sloan
 SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

William W. Sloan
 TYPE NAME(S)

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

06896

REQUESTED BY
STEWART TITLE of DOUGLAS COUNTY
 IN OFFICIAL RECORDS OF
 DOUGLAS CO., NEVADA

'89 JUL 13 P1:26

SUZANNE BEAUDREAU
 RECORDER
 \$11⁰⁰ PAID K12 DEPUTY

10. **Return Copy to**

NAME ADDRESS CITY, STATE AND ZIP
 STEWART TITLE OF DOUGLAS COUNTY
 P.O. Box 1400
 Zephyr Cove., NV. 89448

Escrow No. 02-001757 MB

BOOK **789** PAGE **1121**

THIS SPACE FOR USE OF FILING OFFICER