

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

1. DEBTOR (LAST NAME FIRST) Consolidated Casinos Corp dba: HIGH SIERRA HOTEL & CASINO		1A. SOCIAL SECURITY OR FEDERAL TAX NO.	
1B. MAILING ADDRESS P. O. Box C		1C. CITY, STATE Stateline, NV	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1D. ZIP CODE 89449	
1F. CITY, STATE		1G. ZIP CODE	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
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) HIGH SIERRA HOTEL & CASINO		3A. FEDERAL TAX NO.	
4. DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY) 50		4A. CITY, STATE Stateline, NV	
		4B. ZIP CODE 89449	
5. SECURED PARTY NAME IGT MAILING ADDRESS CITY Reno STATE NV ZIP CODE 89502		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 88-0062109	
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE		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.

and secured party has a security interest in:

 Eight (8) B5145DIQ, 25¢ Quartermania Slots, S/N's: 179011, 179012, 180389, 180390, 180394, 180395, 180400, 180401;

 and any other similar collateral hereafter acquired from IGT.

7A. S/O 62355
 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 <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	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction
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9. Check if Applicable DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

10. (Date) 9-7 1989

Consolidated Casinos Corp dba: HIGH SIERRA HOTEL & CASINO

By: Steven Ballmaras VICE PRESIDENT
 SIGNATURE(S) OF DEBTOR(S) (TITLE)
Steven Ballmaras

By: L. A. Freeman Credit Manager
 SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

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

06935

REQUESTED BY
IGT
 IN OFFICIAL RECORDS OF
 DOUGLAS CO., NEVADA

11. Return Copy to

NAME	IGT
ADDRESS	520 So. Rock Blvd.
CITY, STATE AND ZIP	Reno, NV 89502
	Attn: Configuration

79 SEP 19 10:50

SUZANNE BEAUDREAU
 RECORDER

21115

\$11.00 PAID K12 DEPUTY
 BOOK 989 PAGE 2210

FILING FEES SEE INSTRUCTIONS

THIS SPACE FOR USE OF FILING OFFICER