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

1. FILE NO. OF ORIG. FINANCING STATEMENT	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT	1B. DATE OF ORIG. FINANCING STATEMENT	1C. PLACE OF FILING ORIG. FINANCING STATEMENT
06547	8/17/87	7/20/87	Douglas County

2. DEBTOR (LAST NAME FIRST)
WHITE   RONALD O.

2A. SOCIAL SECURITY OR FEDERAL TAX NO.
■■■-9343

2B. MAILING ADDRESS
PO Box 2427

2C. CITY, STATE
Gardnerville, NV

2D. ZIP CODE
89410

3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)
WHITE   LINDA

3A. SOCIAL SECURITY OR FEDERAL TAX NO.

3B. MAILING ADDRESS
same

3C. CITY STATE

3D. ZIP CODE

4. SECURED PARTY
NAME   Norwest Financial Nevada, Inc.
MAILING ADDRESS   PO Box 2549
CITY   Carson City   STATE NV   ZIP CODE 89702

4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.

5. ASSIGNEE OF SECURED PARTY (IF ANY)
NAME
MAILING ADDRESS
CITY   STATE   ZIP CODE

5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.

6.

A ☐ CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, check here ☐ and insert description of real property on which growing or to be grown in Item 7 below.

B ☐ RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 7 below.

C ☐ ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.

D ☒ TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.

E ☐ AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor required on all amendements.)

F ☐ OTHER

7.

8.   (Date) __10/10__ 19 89

By: _____
SIGNATURE(S) OF DEBTOR(S)   (TITLE)

Norwest Financial Nevada, Inc.

By: Dereck C. Bowlen, Asst Mgr.   (TITLE)
SIGNATURE(S) OF SECURED PARTY(IES)

10.   **Return Copy to**
NAME   Norwest Financial Nevasda, Inc.
ADDRESS   PO Box 2549
CITY, STATE AND ZIP   Carson City, NV 89702

9. This Space for Use of Filing Officer
(Date, Time, Filing Office)

REQUESTED BY Norwest Financial
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'89 OCT 11 P2:41

SUZANNE BEAUDREAU
RECORDER   212784
$ 11.00 PAID ___ DEPUTY
BOOK 1089 PAGE 1227