



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

WOLCOTTS FORM UCC-1NV price class 13E

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

1. RECORD PARTY <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) LESSEE: Doug Dees Construction		1A. SOCIAL SECURITY OR FEDERAL TAX NO	
1B. MAILING ADDRESS P.O. Box 2782		1C. CITY, STATE XXX Minden, NV	1D. ZIP CODE 89423
1E. RESIDENCE ADDRESS		1F. CITY, STATE	1G. ZIP CODE
2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO	
2B. MAILING ADDRESS		2C. CITY, STATE	2D. ZIP CODE
2E. RESIDENCE ADDRESS		2F. CITY, STATE	2G. ZIP CODE
3. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
4. RECORD PARTY NAME MAILING ADDRESS CITY		4A. SOCIAL SECURITY NO FEDERAL TAX NO OR BANK TRANSIT AND A B A NO	
LESSOR: NFB LEASING: A DIVISION OF NEVADA FIRST BANK P.O. BOX 81650 LAS VEGAS, STATE NV ZIP CODE 89180			
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). Proceeds, Additions, Replacements, and Substitution PLEASE SEE EXHIBIT "A" THIS IS A LEASE TRANSACTION: LEASE # 190107446			
6A. _____ SIGNATURE OF RECORD OWNER		6C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)	
6B. _____ (TYPE) RECORD OWNER OF REAL PROPERTY			
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 <input checked="" type="checkbox"/> if Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704 205 AND NRS 104 9403		

9. By:  (Date) 11-31 19 89
 SIGNATURE(S) OF DEBTOR(S) (TITLE)
 Doug Dees (president)

By:  (Date) _____ 19 _____
 SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)
 Diane L. Begnoche

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

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BOOK 1289 PAGE 2152

10. **Return Copy to**

NAME	NFB LEASING
ADDRESS	P.O. BOX 81650
CITY, STATE AND ZIP	LAS VEGAS, NV 89180

THIS SPACE FOR USE OF FILING OFFICER

NFT LEASING

EXHIBIT "A"

LESSOR

LESSEE

NFB LEASING: A DIVISION OF NEVADA FIRST BANK

DOUG DEES CONSTRUCTION *INC*

P.O. BOX 81650

P.O. BOX 2782

LAS VEGAS, NV 89180

MINDEN, NV 89423

QUANTITY	SERIAL NO.	EQUIPMENT (MANUFACTURER, MAKE, MODEL, DESCRIPTION)
		VENDOR: ADVANCED COMMUNICATIONS
(1)		TPx8603 General Electric privacy portable radio phone, 3watts with scan.
(2)		TPX8403 General Electric privacy radio 3 watts with scan
(3)		TPPA11 1200 mah battery
(3)		TPHC15 Belt clips
(2)		H2A1L2A Chargers overnight
(1)		TPCP02 Keypad
(1)		H2A1J1A Overnight charger 3 hours

LESSEE MUST DATE AND SIGN THIS PAGE. **REQUESTED BY** Bank of America **DATE** 11-31-89
 NAME AND ADDRESS MUST ALSO BE SHOWN ABOVE. **IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA LEASE NO.**

'89 DEC 20 11:19 BY: [Signature] **SIGNATURE**
 Doug Dees (president)
 SUZANNE BEAUDREAU **BY:** [Signature] **SIGNATURE**
 RECORDER
 \$ 11.00 PAID [Signature] DEPUTY **TITLE**

216813
 L-16 BOOK 1289 PAGE 2153