

UCC-1 D98 (NV) **STATE OF NEVADA**  
**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) Samuel J. Siracusa		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-8236	
1B. MAILING ADDRESS P.O. Box 3790		1C. CITY, STATE Stateline, NV	1D. ZIP CODE 89449
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 1274 Alicia Circle		1F. CITY, STATE Gardnerville, NV	1G. ZIP CODE 89410
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Siracusa Gloria		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS Same		2C. CITY, STATE	2D. ZIP CODE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) Same		2F. CITY, STATE	2G. ZIP CODE
3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY)		3A. FEDERAL TAX NO.	
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)		4A. CITY, STATE	4B. ZIP CODE
5. SECURED PARTY NAME Norwest Financial Nevada, Inc. MAILING ADDRESS P.O. Box 2549 CITY Carson City, NV 89702 STATE ZIP CODE		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
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, if fixtures, include description of real property to which affixed or to be affixed; if oil, gas or minerals, include description of real property from which to be extracted).

THE PARAGRAPHS CHECKED BELOW DESCRIBE THE PROPERTY COVERED BY THIS FINANCING STATEMENT:

(a) All of the debtors' household goods and sports/recreation equipment now located at the debtors' address shown above except those items prohibited by the Federal Trade Commission's Credit Practices Rule.

(b) The following property located in or about debtors' premises at their address set forth above:

7A. 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. (Date) 1/5 19 90

By: Samuel J. Siracusa Gloria Siracusa  
SIGNATURE(S) OF DEBTOR(S) (TITLE)

Norwest Financial Nevada, Inc.

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

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

06994

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

90 JAN -9 A11 :22

SUZANNE BEAUDREAU  
 RECORDER 217833

\$ 11.00 PAID K12 DEPUTY

STANDARD FORM—FILING FEE \$2.00  
 BOOK 190 PAGE 1436

11. **Return Copy to**

NAME ADDRESS CITY, STATE AND ZIP  
 Norwest Financial Nevada, Inc.  
 P.O. Box 2549  
 Carson City, NV 89702

(1) Filing Officer Copy - Numerical  
 UNIFORM COMMERCIAL CODE—FORM UCC-1

Approved by the Secretary of State

THIS SPACE FOR USE OF FILING OFFICER