

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 (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Per Rasmussen		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-9238	
1B. MAILING ADDRESS 1382 S. Riverview		1C. CITY, STATE Gardnerville, NV	1D. ZIP CODE 89410
1E. RESIDENCE ADDRESS Same		1F. CITY, STATE Same	1G. ZIP CODE
2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Kirsten E. Gleissner		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-5781	
2B. MAILING ADDRESS 1382 S. Riverview		2C. CITY, STATE Gardnerville, NV	2D. ZIP CODE 89410
2E. RESIDENCE ADDRESS Same		2F. CITY, STATE Same	2G. ZIP CODE
3. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
4. SECURED PARTY NAME Southwest Gas Corp. MAILING ADDRESS P.O. Box 1190 CITY Carson City STATE NV ZIP CODE 89702		4A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A B A NO. #88-0085720	
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). Installation of 1 each gas furnace system and 1 each 50 gallon gas water heater at 1382 S. Riverview, Gardnerville, NV; Lot 147 Ranchos 2, APN #27-422-21: Total cost \$XXXXXX \$4253.74			
6A. <u>X</u> 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)
7. Check <input checked="" type="checkbox"/> if Applicable	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		

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) X 10-22 19 89

By: [Signature] Per Rasmussen (TITLE)

X [Signature] Kirsten Gleissner (TYPE NAME(S))

By: [Signature] SALES SUPERVISOR (TITLE)

Southwest Gas Corp. (TYPE NAME(S))

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

07010

REQUESTED BY
Southwest Gas Corp
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'90 JAN 25 10:23

SUZANNE BEAUDREAU
RECORDER **218814**

\$ 11.00 PAID K-12 DEPUTY

10. Return Copy to

NAME **Southwest Gas Corporation**

ADDRESS **Sales Department**

CITY, STATE AND ZIP **P.O. Box 1190 Carson City, NV 89702**