

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) Eaton, Bob		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] -1692	
1B. MAILING ADDRESS 879 Ritter Dr.		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) Eaton, Catherine		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] -6957	
2B. MAILING ADDRESS Same		2C. CITY, STATE Same	2D. ZIP CODE
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

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 one Rudd, Natural Gas Furnace and one 40 gallon gas water heater at 879 Ritter Dr., Gardnerville, NV; Ranchos Unit 4, Lot 12, Block B, APN 27-472-24; Total cost: \$2088.33

6A. X Bob Eaton
SIGNATURE OF RECORD OWNER

6B. Catherine Eaton
(TYPE) RECORD OWNER OF REAL PROPERTY

6C. \$ _____
MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)

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)
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8. Check if Applicable DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

9. (Date) X 10-27 1999

By: X Bob Eaton Bob Eaton (TITLE)

X Catherine Eaton Catherine Eaton (TITLE)

By: J. R. Cuff SALES SUPERVISOR (TITLE)

Southwest Gas Corp (TYPE NAME(S))

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

07012

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

10. Return Copy to

NAME **Southwest Gas Corporation**

ADDRESS **Sales Department**

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

90 JAN 25 10:28

SUZANNE BEAUDREAU
RECORDER **218816**

\$ 11.00 PAID K12 DEPUTY

THIS SPACE FOR USE OF FILING OFFICER