

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) FRED MARKUS		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 2089	
1B. MAILING ADDRESS P.O. BOX 2742 STATELINE		1C. CITY, STATE NV	
1E. RESIDENCE ADDRESS 384 EUGENE		1F. CITY, STATE STATELINE NV	
1D. ZIP CODE 89449		1G. ZIP CODE 89449	
2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) MARILYN MARY C		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 2913	
2B. MAILING ADDRESS SAME		2C. CITY, STATE	
2E. RESIDENCE ADDRESS SAME		2F. CITY, STATE	
2D. ZIP CODE		2G. ZIP CODE	
3. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
4. SECURED PARTY NAME CHRYSLER FIRST FINANCIAL SVCS. MAILING ADDRESS 4161 S. EASTERN AVE STE. E1 CITY LAS VEGAS STATE NV ZIP CODE 89119		4A. SOCIAL SECURITY NO. FEDERAL 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. 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). INSTALL ALUMA-FOAM ROOF ON 24' X 61' 6" MOBILE HOME AND 46' X 11' 6" ROOM ADDITION			
6A. _____ SIGNATURE OF RECORD OWNER		6C. \$ <u>3500.00</u> 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		

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) 5-1 1990

By: [Signature]
 SIGNATURE(S) OF DEBTOR(S) **FRED MARKUS** (TITLE)

[Signature]
 TYPE NAME(S) SECURED PARTY **MARY ROSE** *Manager*

By: [Signature]
 SIGNATURE(S) OF SECURED PARTY(IES) **MARY C MARKUS**
 TYPE NAME(S) **DEBTOR**

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

07096

REQUESTED BY
Chrysler First
 IN OFFICIAL RECORDS OF
 DOUGLAS COUNTY, NEVADA

'90 JUN 14 AIO:25

SUZANNE DEANDREAU
 RECORDER **228095**

\$ 11.00 [Signature] DEPUTY

FILING FEES
 SEE INSTRUCTIONS
 BOOK 690 PAGE 18-18

10. Return Copy to

NAME ADDRESS CITY, STATE AND ZIP	CHRYSLER FIRST FINANCIAL SERVICES CORPORATION Sugarhouse Shopping Center Suite E-1 4161 S. Eastern Avenue Las Vegas, Nevada 89119-5426
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11. FILING OFFICER COPY - ALPHABETICAL

UNIFORM COMMERCIAL CODE FORM UCC-1 (REV. 7-86)

Approved by the Nevada Secretary of State