

22

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

1. DEBTOR (LAST NAME FIRST) STRICKLAND, JAMES		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 7393	
1B. MAILING ADDRESS P/O Box 1791		1C. CITY, STATE Gardnerville, NV	1D. ZIP CODE 89410
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1F. CITY, STATE	1G. ZIP CODE
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) STRICKLAND, Pat		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 2992	
2B. MAILING ADDRESS same as above		2C. CITY, STATE	2D. ZIP CODE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		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		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS: 1982 Hwy 50 East			
CITY: Carson City STATE: NV ZIP CODE: 89701			
6. ASSIGNEE OF SECURED PARTY (IF ANY)		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME:			
MAILING ADDRESS:			
CITY:			
STATE:			
ZIP CODE:			

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 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
---	--	---	--

9. (Date) July 16 19 90

By: James Strickland (SIGNATURE(S) OF DEBTOR(S))
Patricia Strickland (TITLE)

By: Steve Claridge For Norwest Financial (SIGNATURE(S) OF SECURED PARTY(IES))
 (TITLE)

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

07117

REQUESTED BY
Dorinda J. [Signature]
 IN OFFICIAL RECORDS OF
 DOUGLAS CO., NEVADA

'90 JUL 20 AM 11:11

SUZANNE BEAUDREAU
 RECORDER
 \$11.00 PAID [Signature] DEPUTY
 STANDARD FORM—FILING FEE \$2.00

11 **Return Copy to**

NAME: **Norwest Financial**

ADDRESS: **1982 Hwy 50 East**

CITY, STATE AND ZIP: **Carson City, NV 89701**

230611

THIS SPACE FOR USE OF FILING OFFICER