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UARCO Business Forms - Ro

UNIFORM COMMERCIAL CODE-FINANCING STATEMENT-FORM UCC-1
IMPORTANT-Read instructions on back before filling out form

001624

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

1. DEBTOR (LAST NAME FIRST) ALLEN, JOHN R		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [redacted] 3159
1B. MAILING ADDRESS 2652 CLAPHAM AVENUE	1C. CITY, STATE MINDEN, NEVADA	1D. ZIP CODE 89423
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) SAME	1F. CITY, STATE	1G. ZIP CODE
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) ALLEN DARREL S.		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [redacted] 2034
2B. MAILING ADDRESS 2652 CLAPHAM AVENUE	2C. CITY, STATE MINDEN, NEVADA	2D. ZIP CODE 89423
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) B & D WELDING		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 FIRST INTERSTATE BANK OF NEVADA, N.A. MAILING ADDRESS P.O. BOX 68 CITY MINDEN STATE NEVADA ZIP CODE 89423		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 94-1/1212
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 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.

MILLER BIG 40 DIESEL WELDER AND VARIOUS ATTACHMENTS

7A. _____ SIGNATURE OF RECORD OWNER

7B. _____ (TYPE) RECORD OWNER OF REAL PROPERTY

7C. $ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)

THIS SPACE FOR USE OF FILING OFFICER

8. Check [X] If Applicable

A [ ] Proceeds of collateral are also covered	B [ ] Products of collateral are also covered	C [ ] Proceeds of above described original collateral in which a security interest was perfected	D [ ] Collateral was brought into this State subject to security interest in another jurisdiction

9. Check [X] If Applicable

[ ] DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

10. (Date) 7/23/90 19

By: [signature] SIGNATURE(S) OF DEBTOR(S) (TITLE)

FIRST INTERSTATE BANK OF NEVADA, N.A.

By: [signature] AVP & ASST BR. MGR.
M.L. MENESINI SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

11. ✓ NAME ADDRESS CITY, STATE AND ZIP

Return Copy to

FIRST INTERSTATE BANK OF NEVADA, N.A.
P.O. BOX 68
MINDEN, NEVADA 89423

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

07122

REQUESTED BY First Interstate Bank
IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA

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SUZANNE BEAUDREAU
RECORDER

$ 11.00 PAID BK DEPUTY

BOOK 790 PAGE 4121

(1) FILING OFFICER COPY - ALPHABETICAL
UNIFORM COMMERCIAL CODE-FORM UCC-1 (REV. 7-77)

Approved by the Nevada Secretary of State

FILING FEES SEE INSTRUCTIONS

COPY