

1. DEBTOR (LAST NAME FIRST) Rinasz, Myron M		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 4433	
1B. MAILING ADDRESS 1283 Centerville Lane		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)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		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 NAMES OR STYLES (IF ANY)		3A. FEDERAL TAX NO.	
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)		2A. CITY, STATE	2B. ZIP CODE
5. SECURED PARTY NAME Bank Of America Nevada MAILING ADDRESS 1524 Main Street CITY Gardnerville STATE NV ZIP CODE 89410		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 88-0196792	
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. All Equipment; together with the following specifically described property: 1985 Case 580E Backhoe; whether owned now or acquired later; all accessions, additions, replacements, and substitutions; all records of any kind relating to any of the foregoing; all proceeds (including insurance, general intangibles and accounts proceeds).			
7A. _____ SIGNATURE OF RECORD OWNER		7C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)	
7B. _____ (TYPE) RECORD OWNER OR REAL PROPERTY			
8. Check <input checked="" type="checkbox"/> If Applicable	A <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B <input checked="" 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
9. Check <input checked="" type="checkbox"/> If Applicable	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction		
9. Check <input type="checkbox"/> If Applicable	DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403		

10. (Date) 9-19 19 90

Rinasz, Myron M

By: *Myron M Rinasz*
SIGNATURE(S) OF DEBTOR(S) (TITLE)

By: *[Signature]*
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

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

07161

REQUESTED BY
Bof A
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'90 OCT -3 AM 1:10

SUZANNE BEAUDREAU
RECORDER **235891**

11. Return Copy to

NAME **Bank Of America Nevada**
ADDRESS **1524 Main Street**
CITY, STATE **Gardnerville, NV 89410**
AND ZIP