UCC-1 D86 (NV)

STATE OF NEVADA

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

This FINANCING STATEMENT is	presented for filing pu	rsuant to the Nevada Un			
. DEBTOR (LAST NAME FIRST)			1A. SOCIAL SECURITY OR FEDERAL TAX NO.		
ETCHEGOYHEN, COLLEEN M.		1C. CITY, STATE	6	6305	
				1	
622 Renee Court  1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFE	Company from a ad Amaz	Gardnerville	Nevada	89410	
	RENT THAN 18)	IP. CITT, STATE		IG. ZIP CODE	
SAME 2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)			2A. SOCIAL SECURITY	OR FEDERAL TAX NO	
ETCHOGOYHEN, TOMAS N.		2C. CITY, STATE		2D. ZIP CODE	
		20. 0111, 51.112	\ \		
Same 2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFF	TRENT THAN 20)	2F. CITY, STATE	<del></del>	2G. ZIP CODE	
	anditi timit au,		/ /		
Same 3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY)			3A. FEDERAL TAX N	0.	
				į	
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSI	NESS (IF ANY)	4A. CITY, STATE		4B. ZIP CODE	
5. SECURED PARTY			5A. SOCIAL SECURITY	NO., FEDERAL TAX	
Norwest Financial Nevada,	Inc.		NO. OR BANK TRA	NSIT AND A.B.A. NO.	
MAILING ADDRESS P.O. Box 2549					
Carson City	Nevada	ZIP CODE 8970	)2	<b>N</b>	
6. ASSIGNEE OF SECURED PARTY (IF ANY)	J	2.1. 3002	6A. SOCIAL SECURITY	NO., FEDERAL TAX	
NAME			NO. OR BANK TRA	NSIT AND A.B.A. NO.	
NAME MAILING ADDRESS		/ \ \		1 1	
MAILING ADDRESS	STATE 4	ZIP CODE	\	\ / L	
7. This FINANCING STATEMENT covers the following				real property	
THE PARAGRAPHS CHECKED BELOW DESCRIBE THE PRO  XX(a) All of the debtors' household goods and spor items prohibited by the Federal Trade Comm  (b) The following property located in or about described in the second communication of the second communication	ts/recreation equipment nov ilssion's Credit Practices Rui	v located at the debtors' addre e.	ss shown above except those		
				[	
		1 7	Maximum amount of inde		
/ /			secured at any one time (C		
	\		/		
		\ \ \			
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
8. Check X Proceeds of Prod	ucts of Pro	ceeds of above described	_ Collateral was brou		
If A A collateral are collateral	eral are C orig	jinal collateral in which	subject to security in		
Applicable also covered also	covered a so	ecurity interest was perfected	jurisdiction		
9.		10.	This Space for Use of Filing (	Officer	
	(Date) Nov. 19,		ate, Time, File Number and I		
/ /	101: 133	1339			
Colleen M. Etchegoyhen	Tomas N. Etch	nogovhen			
O of - // A	Tollida IV. Ecci	logoynen		· · · · - · · · -	
By lollon Other Carlos				07184	
SIGNATURE(S) OF DESTON(S)		(LTCE)			
Norwest Financia) Nevada, IN	1'0 P		SEAUECTED BY		
Michael Novakorh' Ceed: & Manager			REQUESTED BY		
By: Michael Nówakowski - Credit Manager (TITLE)		Norwest Financial			
			IN OFFICIAL RECORD DOUGLAS CO., NEVA	โอล์	
11. Return Copy to	/		क्षाच्याचार करण जातर (१९११) विकास		
	] -		HOU 6 - A11 -6	13	
NAME 'Norwest Financial ADDRESS P.O. Box 2549			790 NOV 26 A11:0	13	
ALTE OF THE STATE					
AND ZIP Carson City NV 89702			SUZA PET BEAUDI	REAU	
<u></u>	_		RECORGER	 020E33	
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(1) Filing Officer Copy — Numerical	=	4	\$11 PAINE	DEPUTY	
UNIFORM COMMERCIAL CODE-FORM UCC-1	Approved by the Sec	retary of State		FILING FEE \$2.00	
			. BOOK119	0 PAGE 3406	