

UCC-1 D88 (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 pursuant to the Nevada Uniform Commercial Code

1. DEBTOR (LAST NAME FIRST) Walsh Peter		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-9026	
1B. MAILING ADDRESS PO Box 3291		1C. CITY, STATE Stateline NV	1D. ZIP CODE 89449
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 178 Pineridge		1F. CITY, STATE Stateline NV	1G. ZIP CODE 89449
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Walsh Lillian		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-6002	
2B. MAILING ADDRESS Same		2C. CITY, STATE	2D. ZIP CODE
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)		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 Inc. MAILING ADDRESS PO Box 2549 CITY Carson City STATE NV ZIP CODE 89702		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
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, 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

<input checked="" type="checkbox"/> A Proceeds of collateral are also covered	<input type="checkbox"/> B Products of collateral are also covered	<input type="checkbox"/> C Proceeds of above described original collateral in which a security interest was perfected	<input type="checkbox"/> D Collateral was brought into this State subject to security interest in another jurisdiction
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9. (Date) 11-20-1990

By: Peter J. Walsh (SIGNATURE(S) OF DEBTOR(S))  
Lillian Walsh (TITLE)

By: Michael Nowakowski (SIGNATURE(S) OF SECURED PARTY(IES))  
Credit Manager (TITLE)

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

**07189**

REQUESTED BY  
Norwest Financial  
 IN OFFICIAL RECORDS OF  
 DOUGLAS CO., NEVADA

11. Return Copy to

NAME Norwest Financial Inc  
 ADDRESS PO Box 2549  
 CITY, STATE AND ZIP Carson City, NV 89702

**90 DEC -3 11:17**

SUZANNE BEAUDREAU  
 RECORDER **240161**

\$11.00 PAID K12 DEPUTY  
 STANDARD FORM—FILING FEE \$2.00  
 BOOK **1290** PAGE **005**

THIS SPACE FOR USE OF FILING OFFICER