

UCC-1 D86 (NV) STATE OF NEVADA
UNIFORM COMMERCIAL CODE—FINANCING STATEMENT—FORM UCC-1
IMPORTANT—Read instructions on back before filling out form

Douglas

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

| | | | |
|---|--|---|------------------------------|
| 1. DEBTOR (LAST NAME FIRST) Stanley, William | | 1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 0817 | |
| 1B. MAILING ADDRESS PO Box 2141 | | 1C. CITY, STATE Minden, NV | 1D. ZIP CODE 89423 |
| 1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 1568 Wildrose Dr | | 1F. CITY, STATE Minden, NV | 1G. ZIP CODE 89423 |
| 2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Stanley, Mona | | 2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 6758 | |
| 2B. MAILING ADDRESS XXXXXXX SAME | | 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 NEVADA 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)
\$ _____

B. Check 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. (Date) Dec 27 19 90

William Stanley Mona Stanley

By: William Stanley Mona Stanley
SIGNATURE(S) OF DEBTOR(S) (TITLE)

Norwest Financial Inc

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

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

07211

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

'91 JAN -2 10:38

SUZANNE BEAUREAU
RECORDER **242118**

\$11.00 PAID K12 DEPUTY
STANDARD FORM—FILING FEE \$2.00
BOOK **191** PAGE **021**

11. Return Copy to

NAME **NORWEST FINANCIAL INC**

ADDRESS **PO BOX 2549**

CITY, STATE AND ZIP **CARSON CITY, NV 89702**

(1) Filing Officer Copy — Numerical

THIS SPACE FOR USE OF FILING OFFICER