

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

REORDER FROM  
**Registre, Inc.**  
 514 PIERCE ST.  
 P.O. BOX 218  
 ANOKA, MN. 55303  
 (612) 421-1713

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

1. DEBTOR (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>DAWSON, LORALEE</b>		1A. SOCIAL SECURITY OR FEDERAL TAX ID NO. <span style="background-color: black; color: black;">XXXXXXXX-7487</span>	
1B. MAILING ADDRESS <b>876 SELKIRK</b>		1C. CITY, STATE <b>GARDNERVILLE, NV</b>	
1E. RESIDENCE ADDRESS <b>SAME</b>		1F. CITY, STATE	
2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>DAWSON, CHARLES H</b>		2A. SOCIAL SECURITY OR FEDERAL TAX ID NO.	
2B. MAILING ADDRESS <b>876 SELKIRK</b>		2C. CITY, STATE <b>GARDNERVILLE, NV</b>	
2E. RESIDENCE ADDRESS <b>SAME</b>		2F. CITY, STATE	

3.  ADDITIONAL DEBTOR(S) ON ATTACHED SHEET

4. SECURED PARTY NAME <b>AVCO FINANCIAL SERVICES</b> MAILING ADDRESS <b>945 W MOANA LANE</b> CITY <b>RENO, NV</b> STATE      _____      ZIP CODE <b>39509</b>		4A. SOCIAL SECURITY OR FEDERAL TAX ID OR BANK TRANSIT AND A.A. NO.	
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY      _____      STATE      _____      ZIP CODE      _____		5A. SOCIAL SECURITY OR FEDERAL TAX ID OR BANK TRANSIT AND A.A. NO.	

6. 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 growing 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).

**CERTIAN HOUSEHOLD GOODS AND OTHER CONSUMER PERSONAL EKKO PROPERTY**

6A. \_\_\_\_\_  
 SIGNATURE OF RECORD OWNER

6B. \_\_\_\_\_  
 (TYPE) RECORD OWNER OF REAL PROPERTY

6C. \$ \_\_\_\_\_  
 MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)

7. Check <input checked="" type="checkbox"/> if Applicable	A <input type="checkbox"/> Proceeds of collateral are also covered	B <input 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 (Debtors Signature Not Required)	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction (Debtors Signature Not Required)
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8. Check  if Applicable  DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

9. FILE #18139

(Date) 12-13 1990

By: Charles H Dawson (SIGNATURE(S) OF DEBTOR(S))      LORALEE DAWSON (TITLE)

AVCO FINANCIAL SERVICES

By: Lori Huber - Acct Rep (SIGNATURE(S) OF SECURED PARTY(IES))      \_\_\_\_\_ (TITLE)

LORI HUBER (TYPE NAME(S))

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

**07226**

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

10. **Return Copy to**

NAME	AVCO FINANCILA SERVICES
ADDRESS	PO BOX 2262
CITY, STATE AND ZIP	RENO, NV 89505

**'91 JAN 28 10:45**

**SUZANNE BEAUDREAU**  
 RECORDER **243668**  
 DEPUTY

\$ 11.00 PAID K12

**BOOK 191 PAGE 3318**

FILING FEES SEE INSTRUCTIONS

THIS SPACE FOR USE OF FILING OFFICER