

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

Douglas

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

1. DEBTOR (LAST NAME FIRST) Martin, Cheryl K.		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-0863	
1B. MAILING ADDRESS P.O. Box 11161		1C. CITY, STATE Zephyr Cove Nevada	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 680 Tina Court,		1F. CITY, STATE Zephyr Cove Nevada	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Martin, Gary W.		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-0863	
2B. MAILING ADDRESS Same		2C. CITY, STATE	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) Same		2F. CITY, STATE	
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	

5. SECURED PARTY NAME Norwest Financial Nevada, Inc. MAILING ADDRESS P.O. Box 2549 CITY Carson City STATE Nevada 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

A <input checked="" 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	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction
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9. (Date) Feb. 15, 1990 19

By: Cheryl K. Martin Gary W. Martin
SIGNATURE(S) OF DEBTOR(S) (TITLE)

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

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

07236

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

11. Return Copy to

NAME ADDRESS CITY, STATE AND ZIP	Norwest Financial P.O. Box 2549 Carson City NV 89702
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91 FEB 20 10:43

SUZANNE BEAUDREAU
RECORDER **245064**
DEPUTY
\$11.00 PAID *KO*

STANDARD FORM—FILING FEE \$2.00
BOOK 291 PAGE 2015

THIS SPACE FOR USE OF FILING OFFICER