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

•		
1. DEBTOR (ONE NAME ONLY) OLEGAL BUSINESS NAME OLINDIVIDUAL (LAST NAME FIRST) DELOREY, Joseph L.	1A, SOCIAL SECURITY	OR FEDERAL TAX MO.
B, MAILING ADDRESS	1C. CITY. STATE	1D. ZIP CODE
2.0. Box 2085	Minden, Hevada	89423
E. RESIDENCE ADDRESS	1 F, CITY, STATE	1 G. ZIP CODE
1201 Kingslane	Gardnerville, Nevada	89410
ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) DIEGAL BUSINESS NAME DINDIVIDUAL (LAST NAME FIRST) DELOREY, June J.	2A, SOCIAL SECURITY	
2B, MAILING ADDRESS	2C. CITY. STATE	2D. ZIP CODE
P.O. Box 2065	Mināen, Nevada	89423
RE, RESIDENCE ADDRESS	2F, CITY, STATE	2G. ZIP CODE 89410
1201 Kingslane Additional Debtor(s) on Attached Sheet none	Gardnervilla, Nevada	03-310
CCCUPED BADTY	4A, SOCIAL SECURITY	O CENTRAL VAN
SECURED PARTY NAME ROBERT J. POLICHIO	NO OR BANK IRAN	SIT AND A B.A. HO.
MAILING ADDRESS 395 E. Plumb Lane		
	vada zip code 89502	285
. ASSIGNEE OF SECURED PARTY (IF ANY)	FA. SOCIAL SECURITY	HO PEDERAL TAX
NAME	HO OR BANK TRAN	ISIT AND A B.A. HO
MAILING ADDRESS		
CITY STATE	ZIP CODE	
6A. SIGNATURE OF RECORD OWNER	6C. S MAXIMUM AMOUNT OF INDEBTEDNES BE SEGURED AT ANY ONE TIME (OPT	s to
6B. Joseph I. Delorey and June J. Delor		
Check X Proceeds of If Collateral are also covered B Products of Collateral are also covered		ught into this State interest in another lequired)
Check (X) If DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WIT	1 NRS 704.205 AND NRS 104.9403	·
. (Date) April	29 1991 11. This Space for Use of Filing Officer (Date, Time, File Number and Filing Off	icer)
By: SIGNATURE(S) OF DEBTOR(S) ROSSON L. DOLOT	orey	07257
TYPE NAME(S) June J. Selore	elales.	
By: SIGNATURE(S) OF SECURED PARTY(IES) ROBERT J.	olichio REQUESTED BY	• 3
TYPE NAME(S)	IN OFFICIAL RECORDS OF	DURTY
0 Return Copy to	DOUGLAS CU., REVADA	
Northern Nevada Escrov	2	49 836
IAME 5800 Co Vincinia Ch. BAY	91 NAY -2 P1:41	-
DDRESS 5890 So. Virginia St., #4H	BOOK 5	91 PAGE 21
ND ZIP Reno, Nevada 89502		
· Escrow No. 68080-5	SUZANNE ÉEAUDREAU	
EILING GEEGER CORV. ALRIARETICAL	RECORDER	

(1) FILING OFFICER COPY — ALPHABETICAL UNIFORM COMMERCIAL CODE: FORM UCC-1 (REV. 7-86)

Approved by the Nevada Secretary of State

SIL @PAID OK DEPUTY FILING FEES