

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) <b>THORNTON, HOLLY</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO.	
1B. MAILING ADDRESS <b>PO BOX 6351</b>		1C. CITY, STATE <b>STATELINE NV</b>	1D. ZIP CODE <b>89449</b>
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1F. CITY, STATE	1G. ZIP CODE

2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		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 <b>NORWEST FINANCIAL NEVADA, INC.</b>		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS <b>1982 HWY 50 EAST</b>			
CITY <b>CARSON CITY</b>	STATE <b>NV</b>	ZIP CODE <b>89701</b>	

6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS			
CITY	STATE	ZIP CODE	

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 <input checked="" type="checkbox"/> 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) JANUARY 31 1992

HOLLY THORNTON

By: H. G. Thornton  
SIGNATURE(S) OF DEBTOR(S) (TITLE)

NORWEST FINANCIAL NEVADA, INC.

By: BRET SCOGGIN - CREDIT MGR.  
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

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

**07398**

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

'92 FEB 10 AM 11:15

SUZANNE DEAUDREAU  
RECORDER **270696**

\$10.00 PAID KL DEPUTY

BOOK **292** PAGE **1099**

STANDARD FORM—FILING FEE \$2.00

11. Return Copy to

NAME	NORWEST FINANCIAL
ADDRESS	1982 HWY 50 EAST
CITY, STATE AND ZIP	CARSON CITY NV 89701

THIS SPACE FOR USE OF FILING OFFICER