

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) RIVERA, TONY R.		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-2089	
1B. MAILING ADDRESS 1531 WILDROSE		1C. CITY, STATE MINDEN NEVADA	1D. ZIP CODE 89423
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) SAME		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 NORWEST FINANCIAL NEVADA, INC. MAILING ADDRESS 1982 HWY 50 EAST CITY CARSON CITY STATE NEVADA ZIP CODE 89706		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  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) MAY 4, 19 92

Tony R. Rivera

By: Tony R. Rivera (SIGNATURE(S) OF DEBTOR(S)) (TITLE)

Norwest Financial Nevada, Inc.

By: Tracy Kruk (SIGNATURE(S) OF SECURED PARTY(IES)) (TITLE)

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

**07422**

REQUESTED BY Norwest Financial

IN OFFICIAL RECORDS OF DEPARTMENT OF REVENUE

**92 MAY 11 AIO:59**

SUZANNE D. BOURGEOIS  
RECORDER **278285**

\$10<sup>00</sup> PAID K2 DEPUTY

BOOK **592** PAGE **1582**

11. Return Copy to

NAME NORWEST FINANCIAL

ADDRESS 1982 HWY 50 EAST

CITY, STATE AND ZIP CARSON CITY NV 89706

THIS SPACE FOR USE OF FILING OFFICER