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UNIFORM COMMERCIAL CODE—FINANCING STATEMENT CHANGE—FORM N-UCC-2 IMPORTANT—Read instructions on back before filling out form

STATE OF NEVADA

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

1. FILE NO OF ORIG FINANCING STATEMENT 07112 230116			TEMENT 1C. PLACE OF FILING ORIG FINANCING STATEMENT DOUGLAS CO		
2. DEBTOR IAS APPEARS ON ORIGINAL FINANCING STATEMENTI(ONE NAME ONLY) LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST) WILL IAM F JONES				2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
28. MAILING ADDRESS IAS APPEARS ON ORIGIN		2C. CITY, STATE		2D. z≠ coo€	
2526 EAST VALLEY ROAD MINDEN, 3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY)		MINDEN, N	EVADA 3A. SOCIAL SECURITY O	89423	
LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRS		122	-20	40	
2526 EAST VALI	EY ROAD	3C. CITY, STATE MINDEN	NEVADA	30. z⊮coo∈ 89423	
4. ADDITIONAL DEBTOR (IF ANY) ONE NAME ONLY)			4A. SOCIAL SECURITY O		
LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST B. MAILING ADDRESS	0	4C. CITY, STATE		4D. ZP CODE	
		70. GIT, 31AIL		45. 25 000	
5. SECURED PARTY NAME N C F C U MALING ADDRESS P.O. BOX 2	2128		5A. SOCIAL SECURITY IN TRANSIT AND A B A	O. FED TAX NO OR BANK	
crry CARSON		ze coo€ 89°	702	606	
5. ASSIGNEE OF SECURED PARTY (FAM)			GA. SOCIAL SECURITY IN TRANSIT AND A.B.A.	O, FED. TAX NO. OR BANK	
NAME MAILING ADDRESS		< \			
спу	STATE	ZPP CODE			
RELEASE—From the Xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	e Secured Party certifies that the Secured	atement bearing the file num oes not terminate deb I Party has assigned to the A	nber shown above, the Secured et. Assignee above named, all or p	art of the Secured	
TERMINATION—Th	the Financing Statement bearing the file e Secured Party certifies that the Secured I				
	Financing Statement bearing the file nur				
(Signature of D	Debtor(s) and Secured Party(ies)	required on all amend	dments)		
1990 S & S	CAB OVER CAMPER, MODEL 8.	5-3639, STOCK # 2	2843		
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	(Date)	-31 1992			
By: Willy	Flan en				
SIGNATUREIS) OF DESTORES)	JONES	TITLE)		:	
TYPE NAME(S)	× ⁷ //		prouesten by	·	
By: SIGNATUMENTON SECUMED PARTY	Trinks) CORD MINDEN/OFFICE SUPE	RVISOR	William Ja	<u>서 은 /</u> 5 0F 6 A	
TYPE NAME(S)					
Г.,	TY FEBERAL CREDIT UNION	VALLEY Rd. NINDEN.NV 89423	92 JUL 31 AIO:4		
CARSON CLTY,	NEVABA 89702	J	\$ 1 PAID KD	284851 PROFESSION	
1) FILING OFFICER COPY AL Uniform commercial code - form u	PHABETICAL CC-2 (Rev. 7-86) Approved by the Nevada Secretar	I Val Siana WOLCOTTR	BOOK '75'X FORM UCC:20V (error class 130)	PAGE 5762 FILING FEE	