

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) STEVENS, LEANNA		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 1591	
1B. MAILING ADDRESS PO BOX 1173		1C. CITY, STATE MINDEN NV	1D. ZIP CODE 89423
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 650 ANDERSON RANCH		1F. CITY, STATE GARDNERVILLE NV	1G. ZIP CODE 89410
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 NV ZIP CODE 89701		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) **OCTOBER 30** 19 **92**

LEANNA STEVENS

By: *Leanna C. Stevens* (SIGNATURE(S) OF DEBTOR(S)) (TITLE)

NORWEST FINANCIAL NEVADA, INC.

By: *Tracy Kruk* (SIGNATURE(S) OF SECURED PARTY(IES)) (TITLE)
TRACY KRUK - CSR

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

07498

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

92 NOV -2 P12:11

SUZANNE BEAUDREAU
GO RECORDER **292182**

\$10 PAID *Ka* DEPUTY
BOOK **1192** PAGE **132**

STANDARD FORM-FILING FEE \$2.00

11. Return Copy to

NAME
ADDRESS
CITY, STATE
AND ZIP

**NORWEST FINANCIAL
1982 HWY 50 EAST
CARSON CITY NV 89701**

THIS SPACE FOR USE OF FILING OFFICER