

County

UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1
IMPORTANT Read instructions on back before filling out form.

WOLCOTTS FORM UCC-1NV price class 13E

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

1. DEBTOR (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) MARTIN, KARIN ELAINE		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-4581	
1B. MAILING ADDRESS P.O. BOX 16623		1C. CITY, STATE SOUTH LAKE TAHOE, CA	
1E. RESIDENCE ADDRESS		1D. ZIP CODE 96151	
2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		2C. CITY, STATE	
2E. RESIDENCE ADDRESS		2D. ZIP CODE	
2F. CITY, STATE		2G. ZIP CODE	
3. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
4. SECURED PARTY NAME NEVADA BANKING COMPANY MAILING ADDRESS P.O. BOX 5700 CITY STATELINE STATE NEVADA ZIP CODE 89449		4A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A B A NO 94-161	
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE		5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A B A NO	

6. 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 growing and name of record owner of such real estate; if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which to be extracted).

TWIN MERCUISER 165 HORSE POWERED INBOARD/OUTBOARD GASOLINE ENGINES, STARBOARD ENGINE, SERIAL NO. 3891764 & PORT ENGINE SERIAL NO. 3891812. ONE ANCHOR, 2" AQUA METER COMPASS, BOAT COVER, 4 FENDERS, TRIM TABS AND A REMOTE CONTROLLED SPOTLIGHT; whether owned now or aquired later; all accessions, additions, replacements, and substitutions; all records of any kind relating to any of the foregoing; all proceeds (including insurance, general intangibles and accounts proceeds).

6A. _____ SIGNATURE OF RECORD OWNER
6B. _____ TYPE I RECORD OWNER OF REAL PROPERTY
6C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)

7. Check <input checked="" type="checkbox"/> if Applicable	A <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B <input checked="" 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 (Debtors Signature Not Required)	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction (Debtors Signature Not Required)
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8. Check if Applicable DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

9. (Date) Feb 23 1993

By: Karin E. Martin (SIGNATURE(S) OF DEBTOR(S)) (TITLE)

KARIN E. MARTIN (TYPE NAME(S))

By: Michael Horvath (SIGNATURE(S) OF SECURED PARTY(IES)) (TITLE)

NEVADA BANKING COMPANY (TYPE NAME(S))

MICHAEL HORVATH/LOAN SERVICE REPRESENTATIVE

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

07536

REQUESTED BY Nevada Banking Co

IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA

93 FEB 26 10:45

SUZANNE BEAUDREAU RECORDER 300513

\$1000 PAID K2 DEPUTY

10. Return Copy to

NAME NEVADA BANKING COMPANY

ADDRESS P.O. BOX 5700

CITY, STATE AND ZIP STATELINE, NV 89449

THIS SPACE FOR USE OF FILING OFFICER