

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 (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>Kilian, Sharon L.</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 6590	
1B. MAILING ADDRESS <b>665 Joette</b>		1C. CITY, STATE <b>Gardnerville, NV</b>	1D. ZIP CODE <b>89410</b>
1E. RESIDENCE ADDRESS <b>same</b>		1F. CITY, STATE	1G. ZIP CODE
2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>Kilian, David F.</b>		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 6536	
2B. MAILING ADDRESS <b>665 Joette</b>		2C. CITY, STATE <b>Gardnerville, NV</b>	2D. ZIP CODE <b>89410</b>
2E. RESIDENCE ADDRESS <b>same</b>		2F. CITY, STATE	2G. ZIP CODE
3. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
4. SECURED PARTY NAME <b>Nevada Federal Credit Union</b> MAILING ADDRESS <b>P. O. Box 15400</b> CITY <b>Las Vegas,</b> STATE <b>NV</b> ZIP CODE <b>89114</b>		4A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A B A NO <b>880063564</b>	
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). <b>1985 Pro Craft Boat #1750 MGIP1847B585</b> <b>1985 Pro Craft Trailer #14YBC175XFA02008</b> <b>1985 Yamaha Motor #664401137</b>			
6A. _____ SIGNATURE OF RECORD OWNER		6C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)	
6B. _____ (TYPE) RECORD OWNER OF REAL PROPERTY			
7. Check <input checked="" type="checkbox"/> if Applicable	A <input 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 (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)		
8. Check <input checked="" type="checkbox"/> if Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403		

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) March 30, 19 93

By: Sharon L. Kilian David F. Kilian  
SIGNATURE(S) OF DEBTOR(S) (TITLE)

Sharon L. Kilian David F. Kilian  
TYPE NAME(S)

By: Audrey Bomarito  
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

Audrey Bomarito Financial Services Rep.  
TYPE NAME(S)

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

**07579**

REQUESTED BY  
Nevada Federal CU  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

**93 JUN -1 10:54**

SUZANNE BEAUDREAU  
RECORDER

PAID 12 DEPUTY

10. **Return Copy to**

NAME **Nevada Federal Credit Union**  
ADDRESS **P. O. Box 15400**  
CITY, STATE AND ZIP **Las Vegas, NV 89114**