

IMPORTANT—Read instructions on back before filling out form

CENTRAL BUSINESS FORMS—FEDERAL RESERVE BOARD 220-0108

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

1. FILE NO. OF ORIG. FINANCING STATEMENT <b>240158 07187 bk1290</b>	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT <b>pg001 12-3-90</b>	1B. DATE OF ORIG. FINANCING STATEMENT <b>10-19-90</b>	1C. PLACE OF FILING ORIG. FINANCING STATEMENT <b>DOUGLAS</b>
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2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>CLARK, JERRY W.</b>	2A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>9035</b>
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2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) <b>P.O. BOX 2135</b>	2C. CITY, STATE <b>CARSON CITY, NV</b>	2D. ZIP CODE <b>89702</b>
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3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>CLARK, DONNA D.</b>	3A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>0099</b>
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3B. MAILING ADDRESS <b>SAME AS ABOVE</b>	3C. CITY, STATE	3D. ZIP CODE
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4. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)	4A. SOCIAL SECURITY OR FEDERAL TAX NO.
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4B. MAILING ADDRESS	4C. CITY, STATE	4D. ZIP CODE
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5. SECURED PARTY NAME <b>SEARS, ROEBUCK AND CO.</b> MAILING ADDRESS <b>PO BOX 5</b> CITY <b>BOISE</b> STATE <b>ID</b> ZIP CODE <b>83707</b>	5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO. <b>36-1750680</b>
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6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE	6A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
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7. A  CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, fixtures, or oil, gas or minerals check here  and insert description of real property on which growing or to be grown or to which affixed or to be affixed or from which to be extracted in Item 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted within 6 months prior to expiration date.
- B  RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 8 below. Release does not terminate debt.
- C  ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 below.
- D  TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.
- E  AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 8 below. (Signature of Debtor(s) and Secured Party(ies) required on all amendments)

8. MORE PARTICULARLY DESCRIBED ON THE AFOREMENTIONED UCC1

9. (Date) JUNE 9 19 93

By: \_\_\_\_\_ (TITLE)  
\_\_\_\_\_  
TYPE NAME(S)

By: SEARS, ROEBUCK AND CO. (TITLE)  
*Brad Griffin* **BRAD GRIFFIN (LIEN CO-ORDINATOR)**  
TYPE NAME(S)

10. This Space for Use of Filing Officer (Date, Time, Filing Office)

REQUESTED BY  
**STEWART TITLE of DOUGLAS COUNTY**  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

**93 JUN 21 NO:16**

**SUZANNE BEAUDREAU**  
RECORDER  
**PAUL K2** DEPUTY

**310278**

11. Return Copy to

NAME **SEARS, ROEBUCK AND CO.**  
ADDRESS **P.O. BOX 5**  
CITY, STATE **BOISE, ID 83707**  
AND ZIP **ATTN: CAROL(SERVICE)**

THIS SPACE FOR USE OF FILING OFFICER