

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) MCCONVILLE, RANDY		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 4508	
1B. MAILING ADDRESS 1077 CORTEZ LN		1C. CITY, STATE GARDNERVILLE NEVADA	1D. ZIP CODE 89410
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) SAME		1F. CITY, STATE	1G. ZIP CODE
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) MCCONVILLE, MONA		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] -5124	
2B. MAILING ADDRESS SAME		2C. CITY, STATE	2D. ZIP CODE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) SAME		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 3861 SO CARSON ST. CITY CARSON CITY STATE NEVADA 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 Proceeds 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) +++++ Oct 6, 1993

RANDY MCCONVILLE MONA MCCONVILLE

By: *Randy McConville* *Mona McConville*
SIGNATURE(S) OF DEBTOR(S) (TITLE)

NORWEST FINANCIAL NEVADA, LLC.

By: J.R. Hildebrand = Branch Manager *J.R. Hildebrand*
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

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

07650

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

11. Return Copy to

NAME NORWEST FINANCIAL
ADDRESS 3861 SO CARSON ST
CITY, STATE AND ZIP CARSON CITY NV 89701

93 OCT 11 10:40

319763
BK 1093PG1459

SUZANNE BEAUDREAU
RECORDER
Suzanne Beaudreau
DEPUTY

STANDARD FORM-FILING FEE \$2.00

THIS SPACE FOR USE OF FILING OFFICER