

UCC-1 D86 (NV) STATE OF NEVADA
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) JARA, ROY		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 0911	
2B. MAILING ADDRESS 1279 ESTHER WAY		1C. CITY, STATE MINDEN NEVADA	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) SAME		1D. ZIP CODE 89423	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) JARA, SHARYON		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 9282	
2B. MAILING ADDRESS SAME		2C. CITY, STATE	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) SAME		2D. ZIP CODE	
3. DEBTOR (S) TRADE NAME OR STYLE (IF ANY)		2F. CITY, STATE	
4. ADDRESS OF DEBTOR (S) CHIEF PLACE OF BUSINESS (IF ANY)		2G. ZIP CODE	
3A. FEDERAL TAX NO.		3. DEBTOR (S) TRADE NAME OR STYLE (IF ANY)	
4A. CITY, STATE		4. ADDRESS OF DEBTOR (S) CHIEF PLACE OF BUSINESS (IF ANY)	
4B. ZIP CODE		5. SECURED PARTY	

5. SECURED PARTY NAME NORWESET 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 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) OCT 28, 1993

By: ROY JARA SHARYON JARA
SIGNATURE(S) OF DEBTOR(S) (TITLE)

NORWEST FINANCAIL NEVADA, INC.

By: J.R. HILDEBRAND - BRANCH MANAGER
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

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

07658

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 CARSON CITY NV 89701
 AND ZIP

321607

93 NOV -2 A11 :21

SUZANNE BLAIDREAU
 RECORDER
 \$ 16.00 PAID KD DEPUTY

THIS SPACE FOR USE OF FILING OFFICER