

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 (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>FOWLER JOHN S</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>0329</b>
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1B. MAILING ADDRESS <b>3950 MICA COURT</b>	1C. CITY, STATE <b>WELLINGTON NV</b>	1D. ZIP CODE <b>89444</b>
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1E. RESIDENCE ADDRESS	1F. CITY, STATE	1G. ZIP CODE
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2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>FOWLER CAROL J</b>		2A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>1524</b>
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2B. MAILING ADDRESS <b>3950 MICA COURT</b>	2C. CITY, STATE <b>WELLINGTON NV</b>	2D. ZIP CODE <b>89444</b>
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2E. RESIDENCE ADDRESS	2F. CITY, STATE	2G. ZIP CODE
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3.  ADDITIONAL DEBTOR(S) ON ATTACHED SHEET

4. SECURED PARTY NAME <b>BANK OF AMERICA NEVADA</b> MAILING ADDRESS <b>P.O. BOX 98567</b> CITY <b>LAS VEGAS</b> STATE <b>NV</b> ZIP CODE <b>89193</b>		4A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A B A. NO. <b>9472/1224</b>
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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.
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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).

ALL OF DEBTOR'S FIXITURES WHETHER NOW OWNED OR HEREAFTER ACQUIRED, AND ALL ACCESSIONS, SUBSTITUTIONS, REPLACEMENTS AND PARTS, USED OR ACQUIRED FOR USE IN CONNECTION WITH THE DESCRIBED MOBILE HOME; TOGETHER WITH ALL CASH AND NON-CASH PROCEEDS THEREOF INCLUDING BUT NOT LIMITED TO PROCEEDS OF POLICIES OF INSURANCE. COLLATERAL MAY BE AFFIXED TO REAL PROPERTY LOCATED AT 3950 MICA COURT, WELLINGTON NEVADA. 89444, LEGALLY DESCRIBED AS: 1978 FLEETWOOD FESTIVAL SERIAL NO# CAFL34&B&C821680610 64'X 24' MOBILE HOME w/10' extension

6A. SIGNATURE OF RECORD OWNER

**JOHN S FOWLER and CAROL J FOWLER**

6B. (TYPE) 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 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 <input checked="" type="checkbox"/> if Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403
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9. (Date) **SEPT 13, 19 94**

By: *John S Fowler and Carol J Fowler*  
SIGNATURE(S) OF DEBTOR(S) (TITLE)  
**JOHN S FOWLER and CAROL J FOWLER**

By: **BANK OF AMERICA NEVADA**  
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)  
**JOSEPH DECKER, Consumer Loan Officer**

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

**07809**  
**WESTERN TITLE COMPANY, INC.**  
IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA  
**94 SEP 19 P3:48**  
SUZANNE LAUREAU  
RECORDER  
8/16/09 PAID *OK* DEPUTY

10. Return Copy to

NAME **BANK OF AMERICA NEVADA**  
ADDRESS **P.O. BOX 98567**  
CITY, STATE **LAS VEGAS, NV 89193-9942**  
AND ZIP **CUSTOMER # 0291000004882**

THIS SPACE FOR USE OF FILING OFFICER

**346344**  
**BK0994PG2879**