

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) VANDERLINDEN, MICHAEL L. | | 1A. SOCIAL SECURITY OR FEDERAL TAX NO. | |
| 1B. MAILING ADDRESS P.O. BOX 2493 | | 1C. CITY, STATE MINDEN NEVADA | 1D. ZIP CODE 89423 |
| 1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) 985 ASPEN CT. | | 1F. CITY, STATE MINDEN NEVADA | 1G. ZIP CODE 89423 |
| 2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) | | 2A. SOCIAL SECURITY OR FEDERAL TAX NO. | |
| 2B. MAILING ADDRESS | | 2C. CITY, STATE | 2D. ZIP CODE |
| 2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B) | | 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 S. 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 <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 | D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction |
|---|--|---|--|

9. (Date) 10/17 19 94

By: MICHAEL L. VANDERLINDEN
[Signature]
SIGNATURE(S) OF DEBTOR(S) (TITLE)

By: GREG WOMER - CREDIT MANAGER
[Signature]
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

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

07826

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

94 OCT 24 AM 11:18

SUZANNE BLANCHARD
RECORDER
\$15.00 PAID Ke DEPUTY

11. Return Copy to

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

349174

BK 1094 PG 3911

(1) Filing Officer Copy - Numerical

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