

UCC-1 DSS (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) FRASER, CHARLES		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 1339	
1B. MAILING ADDRESS 1340 MUIR DRIVE		1C. CITY, STATE GARDNERVILLE, NV	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) FRASER, KRISTI		2A. SOCIAL SECURITY OR FEDERAL TAX NO. 6767	
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.		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.S.A. NO.	
MAILING ADDRESS 3861 S. CARSON ST.			
CITY CARSON CITY	STATE NEVADA	ZIP CODE 89701	

6. ASSIGNEE OF SECURED PARTY (IF ANY)		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.S.A. NO.	
NAME			
MAILING ADDRESS			
CITY	STATE	ZIP CODE	

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:
1-4 PIECE
1-COFFEE TABLE

7A. Maximum amount of indebtedness to be secured at any one time (OPTIONAL) \$

8. Check <input checked="" type="checkbox"/> if Applicable	A <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B <input checked="" 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
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9. (Date) 10/31 19 94

By: Charles Fraser Kristi Fraser
 SIGNATURE(S) OF DEBTOR(S) (TITLE)

By: Greg Womer
 SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

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

07834

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

94 NOV -7 P4:21

SUZANNE BEAUDREAU
 RECORDER
 \$16 PAID DEPUTY

11. Return Copy to

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

350195
BK 1194 PG 1183

THIS SPACE FOR USE OF FILING OFFICER