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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) <i>Thorton, Holly</i>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] <i>2029</i>	
1B. MAILING ADDRESS <i>P.O. Box 6351</i>		1C. CITY, STATE <i>Stateline, NV</i>	1D. ZIP CODE <i>89449</i>
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B) <i>173 Chimney Rock</i>		1F. CITY, STATE <i>Stateline, NV</i>	1G. ZIP CODE <i>89449</i>
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 <i>Norwest Financial Nevada, Inc</i>		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS <i>3861 S Carson St</i>			
CITY <i>Carson City</i> STATE <i>NV</i> ZIP CODE <i>89401</i>			
6. ASSIGNEE OF SECURED PARTY (IF ANY)		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.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:

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) *Aug 23* 19 *95*

By: *Holly Thorton*
SIGNATURE(S) OF DEBTOR(S) (TITLE)

By: *Julie Lazovich for Norwest*
Julie Lazovich *Ast. Mgr.*
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

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

07985

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

'95 AUG 28 11:15

LINDA SLATER
RECORDER
\$15.00 PAID *K* DEPUTY

11. Return Copy to

NORWEST FINANCIAL

ADDRESS *3861 S. Carson St*

CITY, STATE AND ZIP *Carson City, NV 89701*

369201

THIS SPACE FOR USE OF FILING OFFICER