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(Filing Fees: See Instructions) (O)-671

MPORTANT: Read instructions on back before	re filling out form.		Receip// No	
DEBTOR (ONE NAME ONLY) **LEGAL BUSINESS NAME Smith Val			1A. SOCIAL SECURITY OR F	EDERAL TAX NO.
☐ INDIVIDUAL (LAST NAME FIRST) SMITH VOL	ley Irrigation	1C. CITY, STATE		1D. ZIP CODE
P.O. BOX 45		Smith, NV	Λ	89430
. RESIDENCE ADDRESS		1F. CITY, STATE		16. ZIP CODE
135 Day Lane		Smith, NV	2A. SOCIAL SECURITY OR	89430
ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST)			ER. GOORL GLOOMIT ON	
. MAILING ADDRESS	1	2C. CITY, STATE	\ \	2D. ZIP CODE
. RESIDENCE ADDRESS		2F. CITY, STATE		26. ZIP CODE
ADDITIONAL DEBTOR(S) ON ATTACHED SHEET				
SECURED PARTY			4A. SOCIAL SECURITY NO. OR BANK TRANSIT ANI	FEDERAL TAX NO.
NAME Donald E. Bently				/ /
MAILING ADDRESS P.O. BOX 157 CITY Minden STATE	NV 2	ZIP CODE 89423	3560	
ASSIGNEE OF SECURED PARTY (IF ANY)		OSTEG	5A. SOCIAL SECURITY NO. OR BANK TRANSIT AN	FEDERAL TAX NO.
NAME		< 1	UK BANK IHANSII ANI	J A.B.A. NO.
MAILING ADDRESS CITY STATE		ZIP CODE		
This FINANCING STATEMENT covers the following types or it owner of such real estate; if fixtures, include description of	ems of property (if crops or time	per, 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 description of real property from which to be extracted).	real property to which affixed or	r to be affixed and name of record own	ier of Such feat estate, it oil, gas	Ul Itmicials, include
		Taylo 400		
Catepillar D8L Dozer	Serial #	3312492	,	-
		/ / /		
0 01-10	2-61	/ / /		
	7 //			
SIGNATURE OF REPORD OWN	n/f	6c. s127,800.	A AMOUNT OF INDEBTEDNESS TO	
	TEN //	BE SECUF	ED AT ANY ONE TIME (OPTIONAL)	
68. Donald F. Bently (TYPE) RECORD OWNER OF REAL	PROPERTY	- \ \		
if collateral are Applicable also covered.	storal are also	ceeds of above described original lateral in which a security interest s perfected (Debtor's Signature Required). NRS 104.9402	to security interest in (Debtor's Signature N	another jurisdiction
⊠ NRS 104.9306 1	04.9402 Not	Required). NRS 104.9402	104.9402	
Check if DEBTOR IS A "TRANSMITTING UTI	ILITY'' IN ACCORDANCE WITH I	NRS 704.205 AND NRS 104.9403.	·	
		11.	This Space for Use of Filing Of	ficer: (Date, Time, Fi
(Date)	257April	19 96	Number and Filing Officer)	8106
1.1.00				0200
By SIGNATURE(S) OF DEBTOR(S)		President	Sequeeten av	
	11 1		Bryan L W	000
William Botelho - Smith Va	NAME(S)		IN DEFICIAL RECORD DOUGLAS CO NEV	COL
By Rolls	ntly	Owner	DOUGLAS CO., NEV	AUA 👸
SIGNATURE(S) OF SECURED PARTY(188)	197	(HILLE)		, N
Donald E. Bently	NAME(S)		'96 APR 26 A9:	89 29 88
				ñ
0. Return Cop	y to:	¬ . I	LINDA SLATE	R
NAME BRUAN L. WOOD		Trust	LINDA SLATE RECORDER PAIDKO	
ADDRESS DO BOX 157		Account Number	\$15 PAIDKO	DEPUTY
ADDRESS ID. O. BOX 157 AND ZIP MINDSON NO 894	> >	(if Applicable)	- 	
יאן, שפטעוואן	رب	1	WHITE—Alphabetical; PINK—A	kknowledgement;