

UCC-1 D88 (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) Donati, Donald		1A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 8279	
1B. MAILING ADDRESS P.O. Box 2839		1C. CITY, STATE Gardnerville, NV	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1D. ZIP CODE 89410	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Donati, Pamela		2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 6300	
2B. MAILING ADDRESS same		2C. CITY, STATE	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2D. ZIP CODE	
3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY)		2F. CITY, STATE	
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)		2G. ZIP CODE	
3A. FEDERAL TAX NO.		3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY)	
4A. CITY, STATE		4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)	
4B. ZIP CODE		5. SECURED PARTY	
5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.		NAME Norwest Financial	
5B. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.		MAILING ADDRESS 3861 S. Carson Street	
5C. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.		CITY Carson City STATE NV ZIP CODE 89701	
6. ASSIGNEE OF SECURED PARTY (IF ANY)		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME		6B. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS		6C. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
CITY		6D. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
STATE		6E. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
ZIP CODE		6F. 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

<input checked="" type="checkbox"/> A Proceeds of collateral are also covered	<input type="checkbox"/> B Products of collateral are also covered	<input type="checkbox"/> C Proceeds of above described original collateral in which a security interest was perfected	<input type="checkbox"/> D Collateral was brought into this State subject to security interest in another jurisdiction
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9. (Date) February 3 19 97

By: Donald Donati Pamela Donati
SIGNATURE(S) OF DEBTOR(S) (TITLE)

By: Mills Landon for Norwest Financial
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

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

08228

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

11. **Return Copy to**

NAME
 ADDRESS NorwestFinancial
 CITY, STATE 3861 S. Carson Street
 AND ZIP Carson City, NV 89701

'97 FEB 10 A10:09

LINDA SLATER
 RECORDER
 \$16 PAID DEPUTY

0406328

BK0297PG1021

THIS SPACE FOR USE OF FILING OFFICER