UNIFORM COMMERCIAL CODE - FINANCING STATEMENT CHANGE - FORM N-UCC-2

This STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

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Read instructions on back b	efore filling out form.		Receipt No		
1. File No. of Orig. Financing Statement 243674	1A. Date of Filing of Orig. Financing Statement 1/28/91	1B. Date of Orig. Financir		Place of Filing Orig. Finan ouglas County	
2. DEBTOR (As Appears on Original Fine Legal Business NAME (A) INDIVIDUAL (LAST NAME FIRST)	ncing Statement) (ONE NAME ONLY) Ristuben, Kenneth W. Ristuben, Sandra W.		2A.	SOCIAL SECURITY OR	FEDERAL TAX NO.
2B. MAILING ADDRESS (As Appears on 1666 US Highway 395		2C. CITY, S Minden	STATE	NV	2D. ZIP CODE 89423
3. ADDITIONAL DEBTOR (If Any) (ONE LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST)	NAME ONLY)		3A.	SOCIAL SECURITY OR	FEDERAL TAX NO.
3B. MAILING ADDRESS		3C. CITY, S	STATE		3D. ZIP CODE
4. ADDITIONAL DEBTOR (S) ON ATT	ACHED SHEET				
NAME	Capital Corporation E 4th St., Suite 500		5A.	SOCIAL SECURITY NO OR BANK TRANSIT A	
CITY Bellevue	STATE WA	7IP CODE	98004		
6. ASSIGNEE OF SECURED PARTY (If A		Zii GGDE:	6A.	SOCIAL SECURITY NO	D. FEDERAL TAX NO.
NAME Mailing address City	STATE	ZIP CODE		OR BANK TRANSIT A	
7. A. CONTINUATION-The is crops or timber, fix or from which to be expiration date.	original Financing Statement between the fore tures, or oil, gas or minerals check here and extracted in Item 8 below. If crops or fixtures, a	poing Debtor and Secured Par insert description of real proj also insert name of record ow	ty bearing the file numb perty on which growing ner of real estate. Effec	er and date shown above is or to be grown or to which tive only if submitted wit	continued. If collateral affixed or to be affixed hin 6 months prior to
B. RELEASE-From the obelow. Release does	ollateral described in the Financing Statements not terminate debt.	bearing the file number sho	wn above, the Secured	Party releases the collater	ral described in Item 8
c. ASSIGNMENT-The S Statement bearing th	ecured Party certifies that the Secured Party h e file number shown above in the collateral des	as assigned to the Assignee a cribed in Item 8 below.	above named, all or part	of the Secured Party's righ	its under the Financing
<u></u>	Secured Party certifies that the Secured Party n			\	FOR
E. AMENDMENT-The Fi required on all ame	nancing Statement bearing the file number sho ndments.)	own above is amended as set	forth in Item 8 below.	(Signature of Debtor(s) ar	nd Secured Party(ies) ᅜ 유
8. 2216592-001 AMC	Douglas County; filed	in the Real Es	state record	ds; BK191PG33	OF FILING OFFICER
9.	(Date)		■ Num	Space for Use of Filing Of ber and Filing Officer)	ficer: (Date, Time, File
Ristuben, Kenneth W. Ristuben, Sandra W. By	(bate)		19		,
	S) OF DEBTOR(S)	(TITLE)	L	REQUEST A Docum IN OFFICIAL R	ED BY ST Ser U. ECORUS OF IO
MetLife Capital Corporat By MANUE W	1. Chall			DOUGLAS CO	THEYADA O
	secured Partywes) Senior Contract Admin	(TITLE)		'97 JUN 24	A10:37.
11	TYPE NAME(S)		_	ے دستوری	
LEXIS DO	Return Copy to:			LINDA S RECOR	RDER
NAME	Stevenson Drive		rust count	8/6 PAIDS	2 DEPUTY
	eld, IL 62703	Nu	mber		•
UNIFORM COMMERCIAL CODE-FORM	N-UCC-2 (Rev. 12-93) Approved i	(If App	olicable) YI	ELLOW-Alphabetical; PINK GREEN-Secured Party (Filing Fees: See Instr	; BLUE Debtor.