

**UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1**  
**IMPORTANT Read instructions on back before filling out form.**

WOLCOTTS FORM UCC-1MV price class 13E

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

1. DEBTOR (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>V &amp; C <del>XXXXXXXXXX</del> Construction, Inc.</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 88-0177663	
1B. MAILING ADDRESS P.O. Box 1269		1C. CITY, STATE Minden, NV	
1E. RESIDENCE ADDRESS		1D. ZIP CODE 89423	
2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		2C. CITY, STATE	
2E. RESIDENCE ADDRESS		2D. ZIP CODE	
2F. CITY, STATE		2G. ZIP CODE	
3. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
4. SECURED PARTY NAME <b><del>XXX</del> Nevada Banking Company</b> MAILING ADDRESS <b>1374 Hwy 395, N.</b> CITY <b>Gardnerville</b> STATE <b>NV</b> ZIP CODE <b>89410</b>		4A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. <del>888</del> 88-0170659	
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
6. 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 growing and name of record owner of such real estate; if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which to be extracted). <b>1986 NATIONAL 556 A 11 3/4 TON HYDRAULIC CRANE, 56' 3-SECTION BOOM, ANTI-TWO BLOCK, WEIGHTED HOOK, TWO OPERATOR STATIONS, SERIAL NO. 17917; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds).</b>			
6A. _____ SIGNATURE OF RECORD OWNER		6C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)	
6B. _____ (TYPE) RECORD OWNER OF REAL PROPERTY			
7. Check <input checked="" type="checkbox"/> if Applicable	A <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B <input 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 (Debtors Signature Not Required)
D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction (Debtors Signature Not Required)			
8. Check <input checked="" type="checkbox"/> if Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403		

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) June 26, 19 97

By: *Raymond VanWinkle* SIGNATURE(S) OF DEBTOR(S) *Claudia VanWinkle* (TITLE)

Raymond VanWinkle, Pres. Claudia VanWinkle, Sec.

By: *Susan C. Potter* SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

Susan C. Potter, Assistant Branch Manager

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

**08283**

REQUESTED BY  
Nevada Banking Co  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

'97 JUN 30 110:58

LINDA SLATER  
RECORDER

PAID 15.00 DEPUTY FILING FEES  
SEE INSTRUCTIONS

10. **Return Copy to**

NAME Nevada Banking Company  
ADDRESS 1374 Hwy 395, N.  
CITY, STATE AND ZIP Gardnerville, NV 89410

**0416174**

(1) FILING OFFICER COPY - ALPHABETICAL  
UNIFORM COMMERCIAL CODE FORM UCC-1 (REV 7-86)

BK 697 PG 6029