

STATE OF CALIFORNIA
UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1

This financing Statement is presented for filing and will remain effective, with certain exceptions, for five years from the date of filing, pursuant to Section 9403 of the California Uniform Commercial Code.

1. DEBTOR MOUNT SIERRA MINISTRIES, INC. DBA MOUNT SIERRA SCHOOL		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 88-0342021	
1B. MAILING ADDRESS P.O. BOX 1014		1C. CITY, STATE GARDNERVILLE, NV	1D. ZIP CODE 89410
2. ADDITIONAL DEBTOR		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		2C. CITY, STATE	2D. ZIP CODE
3. DEBTOR'S TRADE NAMES OR STYLES		3A. FEDERAL TAX NUMBER	
4. SECURED PARTY NORWEST BANK NEVADA, NATIONAL ASSOCIATION RENO BUSINESS BANKING 3300 WEST SAHARA AVENUE DIV. 110 LAS VEGAS, NV 89102		4A. FEDERAL TAX NO. 880047695	
5. ASSIGNEE OF SECURED PARTY		5A. FEDERAL TAX NO.	

6. This FINANCING STATEMENT covers the following type of property:

All Inventory, Accounts, Equipment and General Intangibles; 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 other accounts proceeds)..

7A. <input checked="" type="checkbox"/> PRODUCTS OF COLLATERAL ARE ALSO COVERED	7B. DEBTOR (S) SIGNATURE NOT REQUIRED IN ACCORDANCE WITH INSTRUCTION 5(a) ITEM: <input type="checkbox"/> (1) <input type="checkbox"/> (2) <input type="checkbox"/> (3) <input type="checkbox"/> (4)
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8. DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH UCC SECTION 9105 (1) (n)

9. *Andrew N. Prause*
SIGNATURE(S) OF DEBTOR(S) DATE: 04-20-1998

ANDREW N. PRAUSE, CHAIRMAN and KATHRYN J. WINEBARGER, VICE CHAIRMAN

Kathryn Winebarger
SIGNATURE(S) OF SECURED PARTY(IES)

NORWEST BANK NEVADA, NATIONAL ASSOCIATION

11. Return copy to:
Return acknowledgment to:
[Redacted] TION 7
✓Capitol Document Services, Inc.
P.O. Box 3100 Carson City NV 89702
800/899-0490 J

C O D E	10. THIS SPACE FOR USE OF FILING OFFICER (DATE, TIME, FILE NUMBER AND FILING OFFICER)
	08391
	REQUESTED BY <i>Capitol Document</i> IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA <i>Services, Inc</i>
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	LINDA SLATER RECORDER
	\$ 21 ⁰⁰ PAID AS DEPUTY
	0439277
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