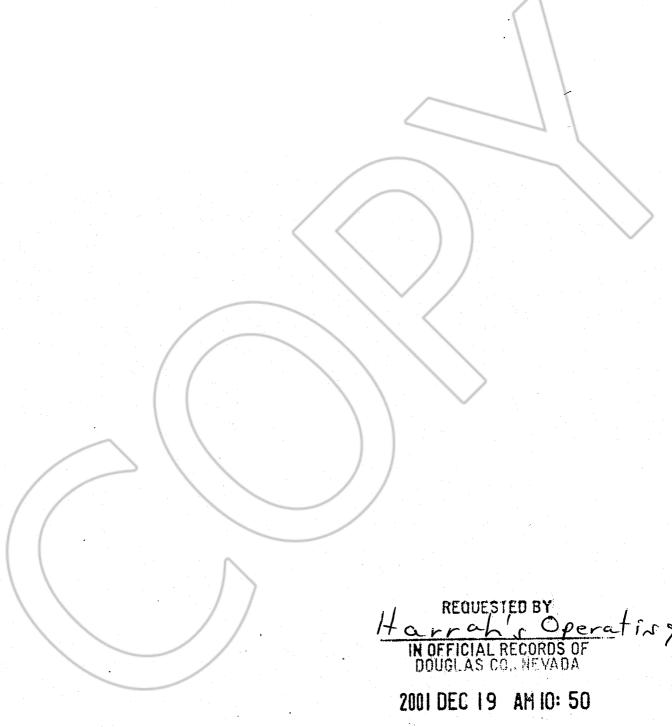
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FOLLOW INSTRUCTIONS (· · · · · · · · · · · · · · · · · · ·		•		
a.name&phoneofco Harrah's Opera	ONTACT AT FILER [optional] Tru	st Acct. #	1			
Inc. (702) 407			1 .		Λ	
	MENT TO: (Name and Address)				/\	
Vernon A. Nel	son, Jr., Esquire			(\	
Harrah's Ente	rtainment, Inc.			1		
One Harrah's	Court				\ \:	
Las Vegas, NV	89119-4312		1.		\ \	
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			THE ABOVE	SPACE IS	FOR FILING OFFI	CE USE ONLY
					\rightarrow	·
1. DEBTOR'S EXACT FUL	L LEGAL NAME - insert only one debto	ar name (12 or 15) - do not abbre	eviate or combine names			
1 a. ORGANIZATION'S NAM	AE-					······································
Carson-Tah	oe Harley Davidso	n. Inc.			1	
OR 1 b. INDIVIDUAL'S LAST NA	ME	FIRST NAME		MIDDLE N	AME	SUFFIX
		-/-				
1 c. MAILING ADDRESS		CITY	· / /	STATE	POSTAL CODE	COUNTRY
560-C South M	eadows Parkway	Reno	1	NV	89511	USA
1d.TAX ID#, SSN OR EIN	ADD'L INFO RE le. TYPE OF ORGA	NIZATION 11. JURISDICT	ON OF ORGANIZATION	1g. ORGA	NIZATIONAL ID # if any	
8207	ORGANIZATION Corporat:	ion Neva	da	/	_	NONE
2, ADDITIONAL DEBTOI	R'S EXACT FULL LEGAL NAME	- insert only one contar nan	ae (2a or 2b) - do not abbreviate	or combine na	imes	
2a. ORGANIZATION'S NAM			\ / /			
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26. INDIVIDUAL'S LAST NA	WE	FIRST NAME		MIDDLE N	AME	SUFFIX
						1.13
2c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
2d. TAX ID #' SSN OR EIN	ADD'L INFO RE 2e. TYPE OF ORGA ORGANIZATION	NIZATION 2f. JURISDIC	TION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID#, if any	[-7
	DEBTOR		7 /	<u>) </u>		L NONE
3. SECURED PARTY'S 3a. ORGANIZATION'S NAM	NAME (or NAME of TOTAL ASSIGNE	E of ASSIGNOR S/P) - insert of	only one secured parly name (3a	or 3b)	<u> </u>	
	perating Company,	Tmo				
OR 35. INDIVIDUAL'S LAST NA		ITIC .		MIDDLE	IANE	SUFFIX
DO. INDIVIDOALO DAOT WA	\ \				w (11)2	CO. T. D.
3c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
	Samuel 1	- /	/			
One Harrah's	COURT MENT covers the following collaterat:	Las V	egas	NV	89119-4312	USA
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The state of the s	unts, chattel pape		ts, and intang	ibles h	eld by Cars	on,
includin	g products and pro	oceeds.		•	. •	
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	ON [if applicable]: LESSEE/LESSOR		NOR BAILEE/BAILOR	SELLER/BU	YER AG. LIEN	NON-UCC FILING
6. This FINANCING STATES	MENT is to be filed [for record] (or record attach Addendum	led) in the REAL 7. Check [if applicable] [ADDI	IO REQUEST SEARCH REPORT(S	S) on Debtor(s) otional]	All Debtors	ebtor 1 Debtor 2
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8. OPTIONAL FILER REFERE	:NUL UAIA					
NATIONAL LIGATION	ANOING CTATELES (CC	M 11004) (DEV 07/4	(0.1)			
NATIONAL UCC FIN	ANCING STATEMENT (FOR	M UCCI) (KEV. 0//1/	U1)	0 1	301.22	
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LINDA SLATER
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