CC FINANCING STATEMENT LOWINSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional] SEND ACKNOWLEDGEMENT TO: (Name and Address)	7			
LOWINSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional]	<u> </u>			
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SEND ACKNOWLEDGEMENT TO: (Name and Address)				
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Invite Union Donk and Tweet Company	. –		\ \	
Irwin Union Bank and Trust Company 1717 E. College Parkway			\ \	
Carson City, NV 89706			\ \	
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	THE ABOVE SP	ACE IS FO	R FILING OFFICE US	E ONLY
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a	or 1b) - do not abbreviate or combine names			
1a. ORGANIZATION'S NAME				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
Crockett	Ronda		Tanan	
MAILING ADDRESS 2 Frontage Road	Gardnerville	NV NV	POSTAL CODE 89410	COUNTRY
TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	
DEBTOR INDIVIDUAL		<u>/</u>		NON
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one do 2a. ORGANIZATION'S NAME	ebtor name (2a or 2b) - do not abbreviate or combine	names		
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
		1		
TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID#, if any	
DEBTOR BECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only one secured party name (3a or 3b)			NON
3a. ORGANIZATION'S NAME	,,			····
Irwin Union Bank and Trust Company 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
STATE OF THE STATE	TINOTIVANIC	IVIIDDEE	NOME	SOLLIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
17 E. College Parkway This FINANCING STATEMENT covers the following collateral:	Carson City	NV	89706	



2002 SEP -4 AM 11: 03

LINDA SLATER RECORDER

\$ 2000 PAID BL DEPUTY

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