

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

1. FILE NO. OF ORIG. FINANCING STATEMENT <b>127319</b>	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT <b>6/6/89</b>	1B. DATE OF ORIG. FINANCING STATEMENT <b>6/6/89</b>	1C. PLACE OF FILING ORIG. FINANCING STATEMENT <b>EUREKA COUNTY</b>
2. DEBTOR (LAST NAME FIRST) <b>WALTER, NORBERT J. SOKRISAKIS</b>		2A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>[REDACTED]</b>	
2B. MAILING ADDRESS <b>P. O. BOX 739</b>		2C. CITY, STATE <b>EUREKA, NV</b>	2D. ZIP CODE <b>89316</b>
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		3A. SOCIAL SECURITY OR FEDERAL TAX NO.	
3B. MAILING ADDRESS		3C. CITY, STATE	3D. ZIP CODE
4. SECURED PARTY NAME <b>EUREKA OFFICE</b> MAILING ADDRESS <b>FIRST INTERSTATE BANK OF NEVADA</b> CITY <b>EUREKA</b> STATE <b>NV</b> ZIP CODE <b>89316</b>		4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.R.A. NO. <b>1212/00019</b>	
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE		5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.R.A. NO.	
<p><input type="checkbox"/> A. CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, fixtures, or oil, gas or minerals check here <input type="checkbox"/> and insert description of real property on which growing or to be grown or to which affixed or to be affixed or from which to be extracted in Item 7 below. If crops or fixtures, also insert name of record owner of real estate.</p> <p><input type="checkbox"/> B. RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 7 below.</p> <p><input type="checkbox"/> C. ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.</p> <p><input checked="" type="checkbox"/> D. TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.</p> <p><input type="checkbox"/> E. AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor and Secured Party required on all amendments.)</p> <p><input type="checkbox"/> F. OTHER (May be used for change of address.)</p>			

6. (Date) 5-2-1994

By: \_\_\_\_\_ (TITLE)

By: *[Signature]* VP MGR.  
SIGNATURE(S) OF SECURED PARTY(IES)

D. This Space for Use of Filing Office  
(Date, Time, Filing Office)

FILED THIS 2ND DAY OF  
MAY 1994 AT 4:44 MINS.  
PAST 1 P.M., RECORDS  
OF EUREKA COUNTY, NV.

*[Signature]*  
EUREKA COUNTY RECORDER

7. Returns Copy to

NAME  
ADDRESS  
CITY, STATE  
AND ZIP

FIRST INTERSTATE BANK OF NEVADA  
P. O. BOX 325  
EUREKA, NV. 89316

152521

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