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| 1. FILING OFFICER COPY NUMBER 1114 | 2. DATE OF THIS FINANCING STATEMENT SEPT 11 1984 | 3. DATE OF PREVIOUS FINANCING STATEMENT AUG 1 1984 | 4. COUNTY OF THIS FINANCING STATEMENT EUREKA COUNTY, NV |
| 5. DEBTOR'S NAME LEGAL BUSINESS NAME RUSSELL, DANIEL H. and ROBERTA A. INDIVIDUAL (LAST NAME FIRST) | | | 6. DEBTOR'S SOCIAL SECURITY OR FEDERAL TAX ID NO. 9112-9988-0038 |
| 7. MAILING ADDRESS c/o MULL & McCARTHY, 1001 SECOND STREET | | 8. CITY STATE Old Sacramento CA | 9. ZIP CODE 95814 |
| 10. ADDITIONAL DEBTOR LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST) | | | 11. SOCIAL SECURITY OR FEDERAL TAX ID NO. |
| 12. MAILING ADDRESS | | 13. CITY STATE | 14. ZIP CODE |
| 15. ADDITIONAL DEBTOR LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST) | | | 16. SOCIAL SECURITY OR FEDERAL TAX ID NO. |
| 17. MAILING ADDRESS | | 18. CITY STATE | 19. ZIP CODE |
| 20. SECURED PARTY NAME Metropolitan Life Insurance Company MAILING ADDRESS 7100 N. Financial Drive, Suite 105 CITY Fresno STATE CA ZIP CODE 93720 | | | 21. SOCIAL SECURITY OR FEDERAL TAX ID OR EIN NUMBER AND A & A ID NO. 1829 |
| 22. ASSIGNEE OF SECURED PARTY NAME MAILING ADDRESS CITY STATE ZIP CODE | | | 23. SOCIAL SECURITY OR FEDERAL TAX ID OR EIN NUMBER AND A & A ID NO. |

7. 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 and insert description of real property on which growing or to be grown or to which affixed or from which to be extracted in Item 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted within 6 months prior to expiration date.
- RELEASE - From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 8 below. Release does not terminate debt.
- ASSIGNMENT - The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 below.
- 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.
- AMENDMENT - The Financing Statement bearing the file number shown above is amended as set forth in Item 8 below. (Signature of Debtor(s) and Secured Party(ies) required on all amendments)

ALL CATTLE OWNED BY DEBTOR IN THE STATE OF NEVADA.

8. (Date) August 9 19 94

By: *Daniel J. Seger* Assistant Manager
METROPOLITAN LIFE INSURANCE COMPANY Western Branch Office
Daniel J. Seger

10. This Space for Use of Filing Officer (Date Time Filing Office)

154809

FILED THIS 22ND DAY OF AUGUST, 1994 AT 53 MIN. PAST 4PM, RECORDS OF EUREKA COUNTY, NV.

Michael Rebaletti
MICHAEL REBALEATI
EUREKA COUNTY RECORDER

11. Return Copy to

NAME METROPOLITAN LIFE AGRICULTURAL INVESTMENTS
ADDRESS WESTERN BRANCH OFFICE
CITY, STATE 7100 N FINANCIAL DRIVE SUITE 105
AND ZIP FRESNO CA 93720-2900

(1) FILING OFFICER COPY ALPHABETICAL
UNIFORM COMMERCIAL CODE FORM UCC 2 (Rev. 7-86) Approved by the Nevada Secretary of State

BOOK 274 PAGE 362

FILING FEE SEE INSTRUCTIONS

THIS SPACE FOR USE OF FILING OFFICER