

1. Return copy or recorded original to

Ford Consumer Finance Co. Inc  
P.O. Box 22008  
Tampa, Fl 33622-2008

THIS SPACE FOR USE OF FILING OFFICER  
Date, Time, Number & Filing Office

Pre-paid Acct. # \_\_\_\_\_

2. Name and Address of Debtor

(Last Name First if a Person)

Robert N. McMahon, Jr.  
Bobbie W. McMahon  
P.O. Box 1255 Lester St.  
Columbiana, Al 35051

Social Security/Tax ID # \_\_\_\_\_

2A Name and Address of Debtor

(IF ANY)

(Last Name First if a Person)

Social Security/Tax ID # \_\_\_\_\_

☐ Additional debtors on attached UCC-E

3. SECURED PARTY (Last Name First if a Person)

PSFS Credit Corporation  
P.O. Box 17128  
Pensacola, Fl 32522

Social Security/Tax ID # \_\_\_\_\_

☐ Additional secured parties on attached UCC-E5. ☒ This statement refers to original Financing Statement bearing File No. 012232Filed with Judge of Probate Shelby Co.Date Filed 7/12 19 856. ☒ Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.7. ☐ Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.8. ☐ Partial or ☒ Full. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4.9. ☐ Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.10. ☐ Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11.

13.00 + 1.00 = 14.00  
8.00 + 1.00 = 9.00  
23.00

11A. Enter Code(s) From  
Back of Form That  
Best Describes The  
Collateral Covered  
By This Filing:

6 0 2Check X if covered: ☐ Products of Collateral are also covered.

PSFS Credit Corporation

Signature(s) of Secured Party(ies)

Signature(s) of Secured Party(ies)

Signature(s) of Debtor(s)

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Type Name of Individual or Business

Type Name of Individual or Business

(1) FILING OFFICER COPY — ALPHABETICAL  
(2) FILING OFFICER COPY — NUMERICAL(3) FILING OFFICER COPY — ACKNOWLEDGEMENT  
(4) FILE COPY — SECOND PARTY(S)

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3  
Approved by The Secretary of State of Alabama

STATE OF ALA. SHELBY CO.  
I CERTIFY THIS  
INSTRUMENT WAS FILED  
90 JUL 26 PM 4:07  
JUDGE OF PROBATE

026038

Name Showcase Mobile Homes Of Alabama, Inc.

ADDRESS OF SELLER Address P.O. Box 716

City Pelham, Alabama 35124

(Please Print) Name(s) Robert N. McMahon, Jr. And Bobbie W. McMahon

ADDRESS OF BUYER Address P.O. Box 1255

City Columbiana County Shelby State Al. Zip Code 35051

Proposed Location of Manufactured Home Same

Tel. No.

FOR OFFICE USE ONLY

OFFICE NO

DEALER NO

ACCT. NO.

As used herein, "Buyer" means all persons who sign this contract as buyer or co-buyer, jointly and severally, and "Seller" means the seller/creditor named above.

In consideration of the following time sale purchase, Buyer promises to pay Seller the Total of Payments shown below in accordance with the payment schedule shown below. Buyer has, as of the date of this contract, purchased from Seller, on a time sale basis under the terms stated herein, and received and accepted in its present condition the following described manufactured home together with the furnishings, equipment, appliances and accessories included in the manufactured home at the time of purchase ("Manufactured Home"):

Description of Manufactured Home New ☒ Used ☐

TRADE NAME	Model	Year	Length	Width	Item	Serial #	Item	Serial #
<u>Richland</u>	<u>2 + 2</u>	<u>85</u>	<u>80</u>	<u>14</u>	SEARS WASHER	<u>C50641134</u>	<u>n/a</u>	
					SEARS DRYER	<u>M51333080</u>	<u>n/a</u>	
SERIAL NO.	<u>RH14760123</u>				INT/THERM AIR/CON.	<u>A000817820</u>	<u>n/a</u>	
SERIAL NO.	<u>NA</u>							

The Seller has made the truth in Lending disclosures contained in this contract unless another party is identified here:

#### ITEMIZATION OF AMOUNT FINANCED:

1. Cash Price (including sales tax of \$ <u>719.00</u> )	\$ <u>25,714.00</u>
Cash Downpayment	\$ <u>2615.00</u>
Trade-in (Year, Make, Model)	<u>NA</u>
Length <u>NA</u> Width <u>NA</u>	
Gross Value \$ <u>NA</u> Lien \$ <u>NA</u>	
Net Trade-In Value	\$ <u>NA</u>
2. Total Downpayment	\$ <u>2615.00</u>
3. Unpaid Balance of Cash Price (1 minus 2)	\$ <u>23,099.00</u>
4. Amounts paid to others on your behalf:	
a. To Insurance Companies:	
(1) Property Insurance:	
Broad Form	
Comprehensive	\$ <u>388.00</u> Expiration Date <u>6-30-86</u>
Mobile Homeowners	\$ <u>NA</u>
(2) Credit Life Insurance	\$ <u>NA</u>
b. To Public Officials:	
(1) License Fee	\$ <u>NA</u>
(2) Registration	\$ <u>NA</u>
(3) Lien Notation Fees	\$ <u>NA</u>
(4) Certificate of Title	\$ <u>NA</u>
(5) D.D.C. Stamps	\$ <u>NA</u>
(6) Tags	\$ <u>NA</u>
(7) Filing Fees	\$ <u>15.00</u>
c. To <u>MTG TAX</u>	\$ <u>44.00</u>
d. To <u>NA</u>	\$ <u>NA</u>
Total (a, b, c, d)	\$ <u>447.00</u>
5. Unpaid Balance (3 plus 4)	\$ <u>23,546.00</u>
6. Proposed Finance Charge	\$ <u>NA</u>
7. Amount Financed (5 minus 6)	\$ <u>23,546.00</u>

#### INSURANCE:

**CREDIT LIFE INSURANCE OPTION:** Credit Life Insurance is not required as a condition of the extension of credit by Seller and will not be provided unless (1) the name and age of the proposed insured are entered here:

Proposed Insured	<u>NA</u>	Age	<u>NA</u>
and (2) Buyer's election of such insurance and its cost is shown by Buyer's initialing below:			
Term	Premium	Election	
<u>NA</u>	\$ <u>NA</u>	I want Credit Life Insurance	
		Initials	<u>NA</u>

If Buyer has elected to obtain this insurance, it will be decreasing term life insurance on the life of the Proposed Insured (initial coverage in the amount of the Total of Payments hereunder or, if less, in the amount of \$ NA), decreasing in coverage in either case in equal monthly increments over the term of the policy. Any application for credit life insurance is subject to the insurer's acceptance and approval.

**PROPERTY INSURANCE:** Buyer is required to have and maintain, at Buyer's expense, insurance against physical damage to the Manufactured Home for the term of this contract, with a loss payable clause protecting lienholder (as interest may appear) with provision for 10 day notice of cancellation to lienholder (minimum coverage — Broad Form Comprehensive in an amount equal to the actual cash value of the Manufactured Home including, if the Manufactured Home is to be located in a designated hazardous flood area, flood insurance coverage if required by Federal law). Vendor single interest insurance, which is solely for the benefit of Seller and does not protect Buyer, is not required as a condition of the extension of credit by Seller. Buyer has the right to obtain insurance through any existing policy or any person of Buyer's choice as well as through Seller. The cost of required insurance and any other property or liability insurance elected by Buyer for the term(s) disclosed in item 4a(1), if procured through Seller, is \$ 388.00.

Buyer's election to obtain such insurance through Seller is shown by the inclusion of this cost in item 4a(1). Additional insurance policies will be required to be purchased or furnished by Buyer, at Buyer's expense, if policies being purchased or provided for expire or are cancelled prior to payment in full of this contract. Should Buyer fail initially to provide required insurance, Seller may, but shall not be obligated to, procure such insurance on Buyer's behalf. If Buyer has provided insurance satisfying the minimum coverage requirements hereunder, but such insurance expires or is otherwise terminated, Seller may, but shall not be obligated to, procure on Buyer's behalf coverage as nearly comparable as is available to that insurance which has expired or been terminated. In either event, the cost thereof plus interest at the highest lawful contract rate will be added to Buyer's indebtedness hereunder.

ANNUAL PERCENTAGE RATE	FINANCE CHARGE	Amount Financed	Total of Payments	Total Sale Price
The cost of your credit as a yearly rate	The dollar amount the credit will cost you:	The amount of credit provided to you or on your behalf:	The amount you will have paid after you have made all payments as scheduled:	The total cost of your purchase on credit including your downpayment of \$ <u>2615.00</u>
<u>14.75</u> %	\$ <u>35047.60</u>	\$ <u>23546.00</u>	\$ <u>58593.60</u>	\$ <u>61208.60</u>

Your payment schedule will be:

Number of Payments	Amount of Payments	When Payments Are Due
<u>180</u>	<u>325.52</u>	Monthly, beginning <u>August 15</u> , <u>1985</u>

**Security:** You are giving a security interest in the Manufactured Home being purchased.

**Late Charge:** If a payment is more than 15 days late, you will be charged 5% of the unpaid amount of the installment or \$5.00, whichever is less.

**Prepayment:** If you pay off early you may be entitled to a refund of part of the finance charge.

**Assumption:** Someone buying your Manufactured Home may, under certain circumstances, be allowed to assume the remainder of the contract on the original terms.

See contract terms below and on reverse side for additional information about nonpayment, default, required repayment in full before the scheduled date and prepayment refunds.

UNLESS CHECKED HERE ( ): LIABILITY INSURANCE FOR BODILY INJURY AND PROPERTY DAMAGE CAUSED TO OTHERS IS NOT INCLUDED.  
NOTICE TO THE BUYER: Do not sign this contract before you read it or if it contains any blank spaces. You are entitled to an exact copy of the contract you sign. Keep it to protect your legal rights.

BUYER ACKNOWLEDGES RECEIPT OF A TRUE COPY OF THIS RETAIL INSTALLMENT CONTRACT.

CAUTION: IT IS IMPORTANT THAT YOU THOROUGHLY READ THE CONTRACT BEFORE YOU SIGN IT.

Robert N. McMahon Jr.  
(Signature of Buyer)  
Bobbie W. McMahon  
(Signature of Co-Buyer)

Showcase Mobile Homes Of Alabama, Inc.  
(Signature of Seller)  
Joe F. Stewart  
President

(Address of Co-Buyer)

Date June 30, 1985

THIS IS A TRUE AND CORRECT COPY

NOTARY COPY

EXP. DATE OF FLORIDA

