		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
GREEN TREE ACCEPTANCE, INC.		
324 INTERSTATE PARK DRIVE		
MONTGOMERY	L 36109	
Pre-paid Acct. # Name and Address of Debtor	(Last Name First if a Person)	
LEDFORD, STANLEY L.		
RT 2 BOX 1383		
ALABASTER	L 35007	PROBLEM SEE
Social Security/		
A. Name and Address of Debtor (IF ANY) LEDFORD, DEWEY L. RT 2 BOX 1383	ा ast Name First if a Person)	
ALABASTER	L 35007	
Social Security / T	<u> </u>	
Additional debtors on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
GREEN TREE ACCEPTANCE, INC.		GREEN TREE ACCEPTANCE, INC.
324 INTERSTATE PARK DRIVE MONTGOMERY	L 36109	324 INTERSTATE PARK DRIVE MONTGOMERY AL 36109
MON1GOMENI		110111101111111
Social Security/Tax ID #	· · · · · · · · · · · · · · · · · · ·	
Social Security/Tax ID #	of Property	
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☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).

No. of Additional Sheets Presented This FINANCING STATEMENT is presented to a Filing Officer for liling pursuant to the Uniform Commercial Code.