Bankers Systems, Inc., St. Cloud, MN\_UCC-1-AL\_4/20/94

## STATE OF ALABAMA - UNIFORM COMMERCIAL CODE - FINANCING STATEMENT FORM UCC-1 ALA.

mortant: Boad Instructions on Back Before Filling out Form.

|  |  | This FINANCING STATEMENT is presented to a Filing Officer for  |
|--|--|--|
| The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).      | No. of Additional<br>Sheets Presented:       | filing pursuant to the Uniform Commercial Code.  |
| Return copy or recorded original to:   | ·  | THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Officer   |
| EVABANK  |  |  |
| P.O. BOX 240   |  |  |
| EVA, AL 35621  |  | -  |
|  |  |  |
|  |  |  |
|  | •  |  |
| Pre-paid Acct #  | (Last Name First if a Person)                | 1  |
| 2. Name and Address of Debtor  GILLOTT TRAVIS BRYON                          | (Last Name Mist if a Ferson)                 | _  |
|  |  |  |
| 134 SEALE RD   |  | 3606<br>606<br>FFE   |
| CALERA, AL 35040   |  |  |
|  |  |  |
|  |  | . 60 60 13 18 18 18 18 18 18 18 18 18 18 18 18 18  |
|  |  | <b>-</b>   |
| Social Security/Tax (D #   | (Last fame First if a Person)                |  |
|  | · 10   |  |
| GILLOTT BRANDI MORSE   |  |  |
| 134 SEALE RD   |  | + 6 w  |
| CALERA, AL 35040   |  |  |
|  |  |  |
| ·  | <u> </u>                                     |  |
| Social Security/Tax ID # _   | <del></del>                                  |  |
| ☐ Additional debtors on attached UCC-E                                       |  | FILED WITH: SHELBY COUNTY JUDGE OF PROBATE   |
| Name and Address of Secured Party  |  | 4. Name and Address of Assignee of Secured Party (IF ANY)  |
| EVABANK  |  |  |
| PO Box 240   |  |  |
| Eva AL 3562  |  |  |
|  |  |  |
| Social Security/Tax ID #   | <u> </u>                                     | <u> </u>   |
| ☐ Additional secured parties on attached UCC-E                               | ·  |  |
| 5. The Financing Statement Covers the Following Types                        | (or items) of Property:                      |  |
| 1986 COACHMEN 40 FT TRA  | AVEL TRAILER SN#1T0                          | C3F647XG1001526  |
|  | •  | 5A. Enter Code(s) From Back of Form That   |
|  | •  | Best Describes The<br>Collateral Covered   |
|  |  | By This Filing:  |
|  |  |  |
| •  |  |  |
| •  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Check X if covered: Products of Collateral are also                          | o covered.                                   | 15 O - Lete and whom filling with the Judge of Probate:  |
| <ol><li>This statement is filed without the debtor's signature</li></ol>     | to perfect a security interest in collateral | 7. Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$ 11,700.00 |
| (check X, if so)  ☐ already subject to a security interest in another jurisd | iction when it was brought into this state.  | Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$   |
| already subject to a security interest in another juris                      | GICTION MUST GEDIOL 2 IOCUTION CHANGOS       | 8. This financing statement covers timber to be cut, crops, or lixtures and is to be cross mounts.                                   |
| which is proceeds of the original collateral describe                        | ed above in which a security interest is     | interest of record, give name of record owner in box 5/  |
| perfected.  acquired after a change of name, identity or corporate           | e structure of debtor.                       | Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature – see Box 6)                                   |
| as to which the filing has lapsed.   |  |  |
| ( ) in Millett Beren)  |  | Signature(s) of Secured Party(ies) or Assignee   |
| Signature(s) of Debtor(s)  | H. Watt                                      | Dewayne 4 Monte  |
| Signature(s) of Debtor(s)  |  | Signature(s) of Secured Party(ies) or Assignee  EVABANK  |
| The Name of Individual or Ducinose   |  | Type Name of Individual or Business  |
| Type Name of Individual or Business  |  | FORM LICC-1  |

(1) FILING OFFICER COPY - ALPHABETICAL (2) FILING OFFICER COPY - NUMERICAL

(3) FILING OFFICER COPY - ACKNOWLEDGEMENT STANDARD FORM - UNIFORM COMMERCIAL CODE - FORM UCC-1 (4) FILE COPY - SECURED PARTY(S) (5) FILE COPY - DEBTOR(S) Approved by The Secretary of State of Alabama

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