Return copy or recorded original to	THIS SPACE FOR USE OF FILING OFFICER
FIRST FAMILY FINANCIAL SERVICES, INC.	Date Time, Number & Filing Office
3590-A HWY 31 SOUTH	
	; ;
PELHAM, AL 35124	~
72051020	
Pre-paid Acct. #_73851820	
Name and Address of Debtor (Last Name First if a Person)	
VILSON, KAREN	
1004 EGG AND BUTTER RD	1 9 5悪
COLUMBIANA, AL 35051	せん ラー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・
	5.4 # 1 5.7.26/15 5.1. PM 5.1.8 Ger
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·	
Social Security/Tax ID #	i di di
A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)	
•	
Social Security/Tax ID #	
Additional debtors on attached UCC-E	
	4 ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
SECURED PARTY (Last Name First if a Person)	4 ASSIGNED FART (III ANT)
FIRST FAMILY FINANCIAL SERVICES, INC.	
3590-A HWY 31 SOUTH	
PELHAM, AL 35124	•
Social Security/Tax ID #	
Social Security / Fax to #	
Additional secured parties on attached UCC-E	<u> </u>
5 K This statement refers to original Financing Statement bearing File No. 1998-035	91
Filed with SHELBY COUNTY JUDGE OF PROBATE	Date Filed 02 / 04 / 19 98
6. Continuation. The original financing statement between the foregoing Debtor and Secured I	
7. Termination. Secured Party no longer claims a security interest under the financing statem.	
8. Partial or The Secured Party's right under the financing statement bearing file number :	shown above to the
Full property described in item 11 or to all of the property listed on this file, is assignment. whose name and address appears in item 4.	gned to the assignee
Assignment. whose name and address appears in item 4. 9	h in item 11
10 🔲 Partial — Secured Party releases the collateral described in item 11 from the financing	
Release number shown above.	
11.	
L. ONE MAGNAVOX 31 INCH TV	11A. Enter Code(s) From
2. ONE MAGNAVOX 25 INCH TV	Back of Form That Best Describes The
3. ONE RCA 19 INCH TV	Collateral Covered By This Filling:
4. ONE RCA VCR	
5. ONE KODAC CAMERA	
6. ONE TOSHISBA HOME COMPUTER SYSTEM	——————————————————————————————————————
	
	
	, , , , , , , , , , , , , , , , , , ,
Check X if covered: Products of Collateral are also covered	
Signature(s) of Debtor(s)	Signature(s) of Secured Party(ies)
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Signature(s) of Secured Party(ies)
KAREN WILSON	FIRST FAMILY FINANCIAL SERVICES, INC.
Type Name of Individual or Business	Type Name of Individual or Business
(1) FILING OFFICER COPY — ALPHABETICAL (3) FILING OFFICER COPY — ACKNOWLEDGEMENT (2) FILING OFFICER COPY — NUMERICAL (4) FILE COPY — SECOND PARTY(S)	\$\text{STANDARD FORM} = \text{UNIFORM COMMERCIAL CODE} = FORM UCC-3 Approved by The Secretary of State of Alabama
• · · · · · · · · · · · · · · · · · · ·	

as denneo in ALA CODE 7-9-105(n).

Sheets Presented:

ting pursuant to the Uniform Commercial Code