STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

47002

Important: Read Instructions on Back Before Filling out Form.

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is prescribed to a Filing filing pursuant to the Uniform Commercial Code.	Officer fore
ASSOCIATES HOUSING FINANCE 3113 SKYWAY CR. NORTH IRVING TX 75038		THIS SPACE FOR USE OF FILING OFFICERS Date, Time Number & Filing Office	
Pre-paid Acct. #	(Last Name First if a Person)		12/28/1999-12/28/1999-15-16-1
2A Name and Address of Debtor (IF ANY) LEDFORD, TRACY A 904 HWY 332 PELHAM AL 35124	(Last Name First if a Person)		
Social Security/Tax ID #	<u> </u>	FILED WITH:	<u> </u>
Additional debtors on attached UCC-E NAME AND ADDRESS OF SECURED PARTY) (Last N ASSOCIATES HOUSING FINANCE 3113 SKYWAY CR. NORTH IRVING TX 75038		JUDGE OF PROBATE SHELBY COUN 4 NAME AND ADDRESS OF ASSIGNEE OF SECURED PARTY (IF	TY ANY) (Last Name First # a Person)
Social Security/Tax ID # Additional secured parties on attached UCC-E			·
5. This statement refers to original Financing Statement Filed with JUDGE OF PROBATE	_	Date Filed 1-23-95	
Full property described in item 11 or to a Assignment, whose name and address appears in 9 Amendment Financing statement bearing file num	curity interest under the financing stateme financing statement bearing file number s If of the property listed on this file is assig	ent bearing the file number shown above hown above to the need to the assignee in item 11	
EQUIPMENT, FURNITURE, FURNIREPLACEMENTS THEREOF. THIS	ISHINGS AND ALL ADD S FINANCING STATEME	LATED ACCESSORIES, APPLIANCES ITIONS AND ACCESSIONS THERETO NT COVERS A MOBILE HOME TIVE UNTIL A TERMINATION STATE	11A Enter Code(s) From AN Backfort form That Best Describes The Collateral Covered
Check X if covered: Products of Collateral are also	covered.		
Signature(s) of Debtor(s)		Signature style Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item 9 is	applicable)	Signature(s) of Secured Party(ies)	
Type Name of Individual or Business		ASSECTATE ACTION OF BASING FINANCI	F'