## 02900193000205665

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

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 presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.		
Return copy or recorded original to:		THIS SPACE FOR USE OF FILING OFFICER	·	<del></del>
Regions Bank 225 West College Street		Date, Time, Number & Filing Office	_	a
Columbiana, AL 35051			(1) ' <b>4</b> '	は田川
			0	<b>5</b>
			ကု	(D) H H H H
Pre-paid Acct. #			ģ	1.024
Name and Address of Debtor	(I set Name First if a Barren)		0	S S S S S S
Joseph, Pratt D.	(Last Name First if a Person)		ณ	可工是否
5868 Chelsea Road			#	でを言っ
Columbiana, AL 35051			بد	
			N C	の言語
			H	
Social Security / Tax ID #				
2A. Name and Address of Debtor	(IF ANY) (Last Name First if a Person)		1	
Social Security / Tax ID #				
Additional debtors on attached UCC-E				
3. SECURED PARTY (Last Name First if a P	'erson)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Narr	ne First if a Person)
Regions Bank			•	
225 West College Street Columbiana, AL 35051				
Social Security / Tax ID #				
		<del></del>		
Additional secured parties on attached UCC		<u>.                                  </u>		
5. The Financing Statement Covers the Follow		<b></b>		· · · · · · · · · · · · · · · · · · ·
owned now or acquired later;	543D With Kohring Saw Serial #T0643 all accessions, additions, replacement	3D5777077; whether any of the foregoing is ts, and substitutions relating to any of the		
toregoing; all records of any kind re	elating to any of the foregoing; all proce	eds relating to any of the foregoing (including		Code(s) From
insurance, general intangibles and a	accounts proceeds)		Best D	of Form That rescribes the
				eral Covered s Filing:
			<del></del>	- — — — — —
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			<del></del>	
Check X if covered: X Products of Collate	teral are also covered.			
6. This statement is filed without the debtor's s		7. Complete only when filing with the Judge of Probate:		
collateral (check X if so)  already subject to a security interest in anoth	her jurisdiction when it was brought into this	The initial indebtedness secured by this financing statemed Mortgage tax due (15c/per \$100.00 or fraction thereof)		00.00
state.	her jurisdiction when debtor's location changed	8. This financing statement covers timber to be cut, crop		d is to be cross
to this state.  which is proceeds of the original collateral de-		indexed in the real estate mortgage records (Describe real have an interest of record, give name of record owner in	I estate and if del	btor does not
is perfected. acquired after a change of name, identity or		······································		
as to which the filing has lapsed.	· · · · · · · · · · · · · · · · · · ·	Signature(s) of Secured Party (Required only) if filed without debtor's Signature	(les) re - see Box 6)	
Donate	1 22 /2-1	forth (me	<del></del>	<del></del>
Signature(s) of Debtor(s)	a gongu	Signatured) of Socured Party(ies) or Assignee		<del>-</del>
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies) or Assignee	<u> </u>	<del>.</del>
ratt De Joseph Individual or Business  1) FILING OFFICER COPY - ALPHABETICAL	(3) FILING OFFICER COPY - ACKNOWLEDGEME	Regions Bank of Individual or Business		
	NOT HEIRO OFFICER COFF - ACKNOWLEDGEMA	NT STANDARD FORM - UNIFORM COMI	MEDCIAL CODE	CORM HOO A