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ICC FINANCING STATEMENT OLLOW INSTRUCTIONS	Shelby		Shelby Cnty Jud 04/20/2017 12:0	ge of Prop 5:55 PM FI	LED/CERT	
NAME & PHONE OF CONTACT AT FILER (optional) LAQUITA YOUNG-WILLIAMS	<u> </u>					
E-MAIL CONTACT AT FILER (optional)						
SEND ACKNOWLEDGMENT TO: (Name and Addre						
ALABAMA GAS CORPORATION 2101 6TH AVE N BIRMINGHAM, AL 35203	,					
			THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a o	<u>· · ·</u>		odify, or abbreviate any pa	art of the Debtor	's name), if any part of the	Individual Debt
name will not fit in line 1b. leave all of item 1 blank, check her 1a ORGANIZATION'S NAME	re and provide the	e Individual Debtor i	nformation in item 10 of t	he Financing Sta	atement Addendum (Form i	UCC1Ad)
R 1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL I	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
HALEY		GLORIA		M		
MAILING ADDRESS 2202 WILLIAMSBURG DR		PELHAM		STATE	POSTAL CODE 35124	COUNTRY
26 INDIVIDUAL'S SURNAME		FIRST PERSONAL I	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
26 INDIVIDUAL'S SURNAME		FIRST PERSONAL I	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS SECURED PARTY'S NAME (or NAME of ASSIGNEE)		CITY		STATE	POSTAL CODE	
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SECURED PARTY'S NAME (or NAME of ASSIGNEE) 3a. ORGANIZATION'S NAME	of ASSIGNOR SECURE	CITY	ie only <u>one</u> Secured Party	STATE name (3a or 3b	POSTAL CODE	
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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9a ORGANIZATION'S NAME				
96. INDIVIDUAL'S SURNAME				
HALEY				
FIRST PERSONAL NAME				
GLORIA ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
M		E ABOVE SPACE I	S FOR FILING OFFI	CE USE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor na	ame or Debtor name that did not fit in line 1b o			
do not omit, modify, or abbreviate any part of the Debtor's name) and enter	r the mailing address in line 10c			
10a ORGANIZATION'S NAME				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
	<u> </u>			
ADDITIONAL SECURED PARTY'S NAME or ASS	SIGNOR SECURED PARTY S NAME	: Provide only <u>one</u> na	ime (11a or 11b)	
ALATEC HEATING & COOLING				
115. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INIT!AL(S	SUFFIX
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	FULTONDALE	STATE	FOSTAL CODE 35068	COUNTRY
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