This FINANCING STATEMENT is presented to a filing officer for filing pursuant to the Uniform Commercial Code: 3. Maturity date (if any):		
1. Debtor(s) (Last Name First) and address(es)	2. Secured Party(ies) and address(es)	For Filing Officer (Date, Time, Number,
MILLENDER, WILLIAM B, LOIS	NORWEST FINANCIAL ALABAMA, ICN.	and Filing Office)
P 0 Box 249	FT WILLIAMS SQ CTR UNTI 4 P 0 box 3	89.
Vincent, Al. 35178	SYLACAUGA, AL. 35150	
		N B B B
		**************************************
4. This financing statement covers the following	types (or items) of property: (Check Caullantia	- 5 984 Q
box of boxes)		
the debtors' address shown above except those items prohibited by the Federal Trade  Commission's Credit Practice's Rule.		
And the following property located in or about debtors' premises at their address set forth above:  5. As signed (s) of the cured forty and their address set forth above:		
PURCHASE MONEY INTEREST GE WASHER WWA-5600AD		
Ge Dryer DDE5700Ad		
RADIOS, TELEVISION, BOOKS, CLOCKS, PA	ty 5504529] \INTINGS,	20
Motor vehicle, yr make		
6. Complete only when filing with Judge of Probate:  The initial indebtedness secured by this financing statement is \$ 684.00		
Mortgage tax due (15¢ per \$100.00 or fraction thereof s 12.05 1.05 + 11,00 + 3,00		
This statement is filed without the debtor's signature to perfect a security interest in collateral. (check X) if so)		
☐ already subject to a security interest in another jurisdiction when it was brought into this state.		
which is proceeds of the original collateral described above in which a security interest was perfected:		
Check X if covered: Proceeds of Collateral are also covered. Products of Collateral are also covered. No. of additional Sheets presented:		
Filed with: PROBATE JUDGE SHELBY	COUNTY	
William Millendu NORWEST FINANCIAL ALABAMA, ICN.		
$\mathcal{L}$		
By: Mis Millenfel		an Milay
Signature(s) of Secured Party(ies)  (1) Filing Officer Copy Alphabetical  (2) STATE OF ALARAMA -FORM IICC. 1		
(1) Filing Officer Copy Alphabetical STATE OF ALABAMA FORM UCC-1.		

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