THIS FINANCING STATEMENT IS PRESENTED TO A FILING OFFICER FOR FILING PURSUANT TO THE UNIFORM COMMERCIAL CODE	
Debtor(s) (Last Name First) and address(es)	Secured Party(ies) and address(es)     3. Filing Officer (Date, Time, No., and
BIRD, JAMES LEWIS III.	ALTUS BANK, A FEDERAL SAVINGS BANK Filing Office)
SEALE, SHEILA FAYE	F/K/A 1ST SOUTHERN FEDERAL S&L
RT. 1 BOX 350 LOT 70	P. O. BOX 160029
PELHAM, AL 35124	MOBILE, AL. 36616
4. Debtor is a utility.	2010787
5. This financing statement covers the following types (or items) of pro-	operty:
ONE 1985 MOBILE HOME RIVEROAKS/RIVE	R CREST, SERIAL NUMBER 11579a1, 705X 14. INCLUDING ALL
RELATED FURNITURE, FIXTURES, APPLIANCES AND EQUIPMENT.	
THIS FINANCING STATEMENT COVERS A N	OBILE HOME WHICH DOES NOT CONSTITUTE INVENTORY AND REMAINS
EFFECTIVE UNTIL A TERMINATION STATEMENT IS FILED.	
Complete only when filing with the Judge of Probate:	23400 00 7. This financing statement covers timber to be cut, crops, or fixtures and is to
6. The initial indebtedness secured by this financing statement is \$\frac{23400.00}{23400.00}\$ be cross indexed in the real estate mortgage records. (Describe real estate and if debtor	
Mortgage tax due (15¢ per \$100.00 or fraction thereof) 12.00	s $\frac{35.10}{+14.00}$ + $\frac{35.1}{4.00}$
8. Check X if covered:   Products of Collateral are also covered.	No. of additional sheets presented
9. This statement is filed without the debtor's signature to perfect a se	
already subject to a security interest in another jurisdiction when into this state.	it was brought
☐ already subject to a security interest in another jurisdiction when debtor's location ☐ acquired after a change of name, identity or corporate structure of debtor.	
	as to which the filing has lapsed.
PROBATE COURT, SHELBY COUNTY	
James Living Bird III by his	LIA I A ROOM
	ALTUS BANK, A PEDERAL SAVINGS BANK
mella stille state by hom	HALL POA (Kallene W. Carpenter LOAN OPR. SUPV.
9 Signature(s) of Debtor(s) ()	Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature—see Box 9)
(1) FILING OFFICER COPY ALPHABETICAL	
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