THIS FINANCING STATEMENT IS PRESENTED	TO A FILING OFFICER F	OR FILING PURSUANT TO	THE UNIFORM COMMERCIAL CODE	
1. Debtor(s) (Last Name First) and address(es)  JONES, THOMAS G. & SUSAN  RT 2 BOX 287-D		IFIC HOUSING	3. Filing Officer (Date, Time, No., and Filing Office)	
MONTEVALLO, AL 35115	SERVICES, IN P O BOX 3850 BIRMINGHAM,	00	DEC 19	0271
4. □ Debtor is a utility.			19	
	D31K5080GA A&	В	TOS THOSATE	
INCLUDING BUT NOT LIMITED TO ALL FURNISHED TO ALL FURNISH			S AND	
THIS FINANCING STATEMENT REMAINS IN  ACCOUNT # 51025160 MATURIT  A Complete only when filing with the Judge of Probate:	Y DATE: 9/25,	/2000		
Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$		CLOSS INDEXECUIT THE LEST G	nt covers timber to be cut, crops, or fixtures a state mortgage records (Describe real estate and of record owner in Box 5	ــــــــــــــــــــــــــــــــــــــ
B. Check X if covered: Products of Collateral are also covered.  This statement is filed without the debter/	<u>.</u>	No. of additional sheets pre	sented	
This statement is filed without the debtor's signature to perfect a already subject to a security interest in another jurisdiction when into this state.  I already subject to a security interest in another jurisdiction when changed to this state.	it was brought	ral (check X, if so)  which is proceeds of the interest is perfected.	ne original collateral described above in which as of name, identity or corporate structure of deas lapsed.	_
iled with: JUDGE OF PROBATE	· · · · · · · · · · · · · · · · · · ·	······································	012935	
	<u> </u>	SECURITY PACIF	C HOUSING SERVICES, INC	•
gnature(s) of Debtor(s)	<u> </u>	- Telline	AGENT	
) FILING OFFICER COPY ALPHABETICAL		(Required only	ionature(s) of Secured Party(ies) if filed without debtor's Signature-see Box 9)	

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