The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	filing pursuant to the Uniform Commercial Code.
Return copy or recorded original to:		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
First Bank of Child	ersburg	
Vincent Branch	•	\simeq
P.O. Box K		
Vincent, AL 35178		ယ္ဆ
Pre-paid Acct. #	(Last Name First if a Person)	
2. Name and Address of Debtor	(4.23.7.12	
		- A
Hamm, Gina		<u>()</u>
1780 Hwy 25 South		
Harpersville, AL	35078	UDGE STRUCK
Social Security/Tax ID #		
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)	3
Mims, Mike		SELBY SELBY
1780 Hwy 25 South		
Maraxx		~ = 3 8
Harpersville, AL	35078	% 0.
πατροιοι		
Social Security/Tax ID #		
Additional debtors on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
3. SECURED PARTY) (Last Name First if a Person)		4. ASSIGNEE OF SECONED FAITH
First Bank of Chil	dersburg	
P.O., Box 329		
Childers <u>burg</u> , AL	<u>35</u> 044	
Social Security / Tax ID #		
Additional secured parties on attached UCC-E		
5. The Financing Statement Covers the Following Types ((or items) of Property:	
1970 Valent MH # 6	719	
13/0 Valencino	• • •	5A. Enter Code(s) From
		Back of Form That Best Describes The
		Collateral Covered By This Filing:
		600 602
		1.95+14.00=2195
Check X if covered: DXPXoducts of Collateral are als	o covered.	The state of Probate:
6. This statement is filed without the debtor's signature to	perfect a security interest in collateral	The initial indebtedness secured by this financing statement is \$
(check X, if so)	liction when it was brought into this state.	Mortgage tax due (15¢ per \$100.00 or fraction therebil) 3
already subject to a security interest in another jurisc	inchest which demands	8. This linancing statement covers uncords (Describe real estate and if debtor does not have
to this state. which is proceeds of the original collateral described	s above in which a security interest is	an interest of record, give hame or root
perfected. acquired after a change of name, identity or corporate		Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6)
as to which the filing has lapsed.	······································	
m 11.		Jack M. Guire
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies) or Assignee
Signature(s) or Deputor(s)	<u> </u>	Signature(s) of Secured Party(ies) or Assignee
Signature(s) of Debtor(s)		First RYNKKX Bank of Chillue Souly
The Marke of Individual or Business	<u></u>	Type Name of Individual or Business STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-1
	G OFFICER COPY — ACKNOWLEDGEMENT	(5) FILE COPY DESTOR(S) STANDARD FORM — ONLY Of State of Alabama Approved by The Secretary of State of Alabama
(2) FILING OFFICER COPY — NUMERICAL (4) FILE	COPY - SECOND PARTY(S)	
		· · · · · · · · · · · · · · · · · · ·

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