☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is pres filing pursuant to the Uniform Comme		fficer for	_ 1 11 2777 - 2
Return copy or recorded original to	<u></u>	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office			
LANGE, SIMPSON, ROBINSON & SOME 1700 FIRST ALABAMA BANK BUILDIN BIRMINGHAM, AL 35203 ATTN: MR. RICHARD TISHLER			MD 3500N	91 AUG 13	029 <u>(</u>
Pre-paid Acct. # 2. Name and Address of Debtor	(Last Name First if a Person)		-c h		ြယ
Foley, George D. 370 County Rd. 103 Wilsonville, AL 35186			ROBATT TO THE	H 72: 02	
Social Security/Tax ID #	(Last Name First if a Person)				
Foley, Trudy G. 370 County Rd. 103 Wilsonville, AL 35186					
Social Security/Tax ID #					
Additional debtors on attached UCC-E				-4	- B
RESOLUTION TRUST CORPORATION, RECEIVER FOR CITY FEDERAL SAVINGS AND LOAN ASSOCIATION 2030 SECOND AVENUE, NORTH BIRMINGHAM, AL 35203 Social Security/Tax 1D #		4. ASSIMETERS PER PER PAR CALCAL CALCAL ROSE DISCOUNT MOBILE ROUTE 1, BOX 185-B HICKORY, MS 39332		Savings""	a reison,
☐ Additional secured parties on attached UCC-E		025715			
5. This statement refers to original Financing Statem	nent bearing File No. 012365	A		75 /	3-2A
Filed with Shelby Co.		Date Filed *FTCB /	19_		270
8. Partial or The Secured Party's right under the Party right under the	security interest under the financing statem he financing statement bearing file number o all of the property listed on this file, is assi	shown above to the gned to the assignee the in item 11.	<u>}</u>	A Enter Code(s) Fr Back of Form Th Best Describes Collateral Covere By This Filing:	rom nat The
Check X if covered: ☐ Products of Collateral are also Signature(s) of Debtor(s) Signature(s) of Debtor(s) (necessary only if item 9 in the content of the		CITY FATTERAL SAVINGS AND Signature (s) by Secure Febry (ivs) BY:	Noich		CT
	OFFICER COPY — ACKNOWLEDGEMENT		DRM - UNIFORM C	OMMERCIAL CODE -	
	OPY — SECOND PARTY(S)			etary of State of Alabai	