

1. Return copy or recorded original to:

THIS SPACE FOR USE OF FILING OFFICER  
Date, Time, Number & Filing Office

THE ASSOCIATES FINANCIAL SERVICES CO OF AL INC  
1633 MONTGOMERY HIGHWAY STE 1  
BIRMINGHAM, AL 35236

Pre-paid Acct. # 0600999

2. Name and Address of Debtor (Last Name First if a Person)

CULP, PRESTON  
421 CHILTON ROAD 137  
CALERA, AL 35040

Social Security/Tax ID #

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)

CULP, VERA  
421 CHILTON ROAD 137  
CALERA, AL 35040

Social Security/Tax ID #

☐ Additional debtors on attached UCC-E

3. SECURED PARTY (Last Name First if a Person)

THE ASSOCIATES FINANCIAL SERVICES CO OF AL  
1633 MONTGOMERY HIGHWAY STE 1  
BIRMINGHAM, AL 35236

Social Security/Tax ID #

☐ Additional secured parties on attached UCC-E

5. The Financing Statement Covers the Following Types (or items) of Property:

1984 Nova by Frontier 14 X 70 3 BB 1 3/4 Bath  
Serial # BI 20688-A

5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

8 0 4 3 0 0

Check X if covered: ☐ Products of Collateral are also covered.

6. 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.  
☐ already subject to a security interest in another jurisdiction when debtor's location changed to this state.  
☐ which is proceeds of the original collateral described above in which a security interest is perfected.  
☐ acquired after a change of name, identity or corporate structure of debtor  
☐ as to which the filing has lapsed.

7. Complete only when filing with the Judge of Probate:

The initial indebtedness secured by this financing statement is \$ 4695.61

Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 21.05

8. ☐ This financing statement covers timber to be cut, crops, or fixtures and is to be cross indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 5)

Signature(s) of Secured Party(ies)

(Required only if filed without debtor's Signature — see Box 6)

Signature(s) of Secured Party(ies) or Assignee

Signature(s) of Secured Party(ies) or Assignee

THE ASSOCIATES FINANCIAL SERVICES

Type Name of Individual or Business

Type Name of Individual or Business

(1) FILING OFFICER COPY — ALPHABETICAL  
(2) FILING OFFICER COPY — NUMERICAL

(3) FILING OFFICER COPY — ACKNOWLEDGEMENT  
(4) FILE COPY — SECOND PARTY(S)

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM 1  
Approved by The Secretary of State of Alabama

029195

JUDGE OF PROBATE

91 AUG 21 AM 9:37

STATE OF ALA. SHERIFF CO.  
I CERTIFY THIS  
INSTRUMENT WAS FILED