☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented	This FINANCING STATEMENT is presented to a Filing Officer for 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	
Security Pacific Hous	ing Services, Inc.		
P.O. Box 385000			
Birmingham, Al 3523	8-5000		
			Q3
			0
Pre-paid Acct. # 2. Name and Address of Debtor	(Last Name First if a Person)	ح م √	ÕÕ
Winfrey, Davey			Q
1109 Hwy. 35			
Pelham, Al 35124			
Shelby County	53000107		
Social Security/Tax ID #			
2A. Name and Address of Debtor (IF	ANY) (Last Name First if a Person)		
		. 51	.8
Social Security/Tax ID #	<u> </u>		
☐ Additional debtors on attached UCC-E			
3. SECURED PARTY (Last Name First If a Perso	in)	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a f	rerson)
Security Pacific Hou	sing Services, Inc.		
P.O. Box 385000			
Birmingham, Al 352	38-5000		
Social Security/Tax ID #			
☐ Additional secured parties on attached UCC-	E		
s MXthis statement refers to original Financing	o Statement bearing File No016281		
5 XX his statement refers to original Financing Statement bearing File No. 016281 Filed withShelby County		Date Filed	
e Macontinuation. The original financing state	ement between the foregoing Debtor and Secured	Party, bearing file number shown above, is still effective.	
7. Termination. Secured Party no longer c	claims a security interest under the financing statem under the financing statement bearing file number.	shown above to the	
☐ Full property described in item	1 11 or to all of the property listed on this file, is assi	signed to the assignee	
Assignment. whose name and address 9. ***********************************	ing tile number shown above is amended as set for	rth in item 11.	
10. Partial Secured Party releases the Release number shown above.	e collateral described in item 11 from the financing	statement bearing file	0
11.		44 A. Enter Codo(a) Eron	
THIS I	FINANCING STATEMENT WIL	LL BE EFFECTIVE Back of Form That Best Describes Th	
UNTIL	NT IS FILED. Collateral Covered By This Filing:		
		<u>1 0 3</u>	
		<u>6 0 2</u>	
			<u> </u>
		\sim $$	
Check X if covered: Products of Collater	ral are also covered.		· · · · ·
			. <u> </u>
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only	v if item 9 is applicable)	Signature(s) of Secured Party(ies)	
Signature(s) or Deploits) thecessary only	<u></u>	SECURITY PACTETC HOUSING SERVICES, Type Name of Individual or Business	
Type Name of Individual or Business	(3) FILING OFFICER COPY — ACKNOWLEDGEMENT	STANDARD FORM — UNIFORM COMMERCIAL CODE —	FORM UCC
(1) FILING OFFICER COPY — ALPHABETICAL (2) FILING OFFICER COPY — NUMERICAL	(4) FILE COPY — SECOND PARTY(S)	(5) FILE COPY DEBTOR(S) Approved by The Secretary of State of Alabam	
		··	