	THIS FINANCING STATEM		
1. DEBTOR (IF PERSONAL) LAST NAME FIRST NAME ELBERT			1B. SUFFIX
MCNEIL. 1C. MAILING ADDRESS	1D. CITY, STATE	<u> </u>	1E. ZIP CODE
P.O. BOX 1721	ALABASTER, A		35007-1721
2. ADDITIONAL DEBTOR (IF PERSONAL) LAST NAME FIRST NAME	M.I.	2A. PREFIX	2B. SUFFIX
2C. MAILING ADDRESS	2D. CITY, STATE		2E. ZIP CODE
3. SECURED PARTY (IF PERSONAL) LAST NAME FIRST NAME TERRY-DAVIS PARTNERSHIP, LTC.	M.I.	•	· · · · · · · · · · · · · · · · · · ·
3A. MAILING ADDRESS	3B. CITÝ, STATE	. 27	3C. ZIP CODE
P.O. BOX 16208	LUBBOCK, TX	· · · · · · · · · · · · · · · · · · ·	79490-6208
4. ASSIGNEE OF SECURED PARTY (IF ANY)			·
4A. MAILING ADDRESS	4B. CITY, STATE		4C. ZIP CODE
5. This FINANCING STATEMENT covers the following types or items	of property. (If collai	eral is crops, fix	ctures, timber or
minerals, read Instruction B. 5-6 on back.)	or property. (1. cottu	, o, ac , o a, opo,	
1987 FEEETWOOD MOBILE HOME , FESTIVAL	14770 TD#FLF11A	H152617606	
TROY PERETHOOD MODILES HOME , IEDITARE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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Balance owing: \$13,273.80			
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6. CHECK ONLY 6A. PRODUCTS OF 6B. THIS FI	NANCING STATEMENT IS	LUMBER OF ADDITIONA	
IF COLLATERAL ARE TO BE F	ILED FOR RECORD IN	NUMBER OF ADDITIONA	
IF COLLATERAL ARÉ TO BE F	ILED FOR RECORD IN		
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