

1. Return copy or recorded original to

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

AVCO FINANCIAL SERVICES
PO BOX 9467
BHAM AL 35220

Pre-paid Acct. #

2. Name and Address of Debtor

(Last Name First if a Person)

FINCHER,, OSCAR AND MARY ANN
15232 HWY 43
VANDIVER AL 35176

Social Security/Tax ID #

2A. Name and Address of Debtor

(IF ANY)

(Last Name First if a Person)

Social Security/Tax ID #

☐ Additional debtors on attached UCC-E

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

AVCO FINANCIAL SERVICES, INC.
P.O. BOX 9467
BIRMINGHAM, AL 35220

Social Security/Tax ID #

FILE #2050

☐ Additional secured parties on attached UCC-E

5. ☐ This statement refers to original Financing Statement bearing File No.

Filed with

Date Filed

19

6. ☐ Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.

7. ☐ Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.

8. ☐ Partial or Full Assignment. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4.

9. ☐ Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.

10. ☐ Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11.

(1) DINING ROOM SUITE
1 ZENITH 27 INCH TELEVISIOIN WITH STEREO AND REMOTE

11A. Enter Code(s) From
Back of Form That
Best Describes The
Collateral Covered
By This Filing:

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

Oscar F. Fincher Mary Ann Fincher
Signature(s) of Debtor(s)

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Type Name of Individual or Business

Heath M. Dudley
Signature(s) of Secured Party(ies)

Signature(s) of Secured Party(ies)

AVCO FINANCIAL SERVICES
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 UCC-3
Approved by The Secretary of State of Alabama

Inst # 1993-29106
09/21/1993 29106
02:28 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
001 MCO 19.15

3.15
1200
15.15

AMT FIN 2004.84
15.00 + 1.00 + 3.15 = 19.15
19.15