STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT FORM UCC-1 ALA.

Important: Read Instructions on Back Before Filling out Form.

☐ The Debtor is a transmitting utility as delined 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:	<u> </u>	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
FIRST FAMILY FINANCIAL SERVICE 3594 PELHAM PARKWAY STE 102	E, INC.	
PELHAM, AL 35124		TIED 162
Pre-paid Acct. #	(Last Name First / a Pe	
JOHNSEY, FRANK B 1564 KENT DAIRY RD L 157 ALABASTER, AL 35007		# 1993 PM CER
Social Security/Tax ID #	VY) (Last Name First if a Pe	Person)
Social Security/Tax ID #	÷.	
☐ Additional debtors on attached UCC-E		
3. SECURED PARTY) (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Pe
FIRST FAMILY FINANCIAL SERVICE 3594 PELHAM PARKWAY STE 102 PELHAM, AL 35124	, INC.	
Social Security/Tax ID #		
5. The Financing Statement Covers the Following Ty	ypes (or items) of Property:	
	6	
1974 AKIN AIRE MOBILE HOME SER	IAL #0611 60X12 \ 3	5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
	9	
	•	
Check X if covered: Products of Collateral are	e also covered.	·
6. This statement is filed without the debtor's signature (check X, if so)	· · · · · · · · · · · · · · · · · · ·	7. Complete only when fitting with the Judge of Probate: The initial indebtedness secured by this financing statement is \$ 4196.52
 already subject to a security interest in another just already subject to a security interest in another just to this state. which is proceeds of the original collateral description. 	urisdiction when debter's location chang	Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$
perfected. acquired after a change of name, identity or corp.	•	an interest of record, give name of record owner in Box 5) Signature(s) of Secured Party(ies) (Required only if filled without debtor's Signature — see Box 6)
as to which the filing has lapsed		(Hequired only if lifed williout debitor's Signature — See Box 6)
Signature(s) of Debtor(s)	ey	Signature(s) of Secured Party(ies) or Assigned
Signature(s) of Debtor(s) FRANK B JOHNSEY Type Name of Individual or Business		Signature(s) of Secured Party(ies) or Assignee FIRST FAMILY FINANCIAL SERVICE, INC. Type Name of Individual or Business
	LING OFFICER COPY — ACKNOWLEDGEN LE COPY — SECOND PARTY(S)	AND ADD CORE - C