

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

**Important: Read Instructions on Back Before Filling out Form.**

REORDER FROM  
**Registré, Inc.**  
514 PIERCE ST.  
P.O. BOX 218  
ANOKA, MN. 55303  
(612) 421-1713

<input type="checkbox"/> 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.
1. Return copy or recorded original to:  <div style="display: flex; justify-content: space-between;"> <div>First Bank of Childersburg P. O. Box 329 Childersburg</div> <div>1/31/94</div> </div> <div style="text-align: right; margin-top: 20px;">2/2/97</div>		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office  <div style="text-align: center; font-size: 1.2em; transform: rotate(-90deg);">             Inst # 1994-04452           </div> <div style="text-align: center; font-size: 1.2em; transform: rotate(-90deg);">             02/09/1994-04452 01:33 PM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 26.10 001 MJS           </div>
2. Name and Address of Debtor (Last Name First if a Person)  James Willcutt P. O. Box 253 Vincent, AL 35178  Social Security/Tax ID # [REDACTED]		Filed with:
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)  Social Security/Tax ID # _____		
<input type="checkbox"/> Additional debtors on attached UCC-E		
3. SECURED PARTY (Last Name First if a Person)  <b>FIRST BANK OF CHILDERSBURG</b> 120 8th Ave. P.O. Box 329 Childersburg, Alabama 35044  Social Security/Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
<input type="checkbox"/> Additional secured parties on attached UCC-E		
5. The Financing Statement Covers the Following Types (or items) of Property:  <div style="font-size: 1.2em; margin-top: 20px;">1988 Cavalier 14 x 56 Mobile Home # 6786</div>		
<div style="display: flex; justify-content: space-between;"> <div>           Check X if covered: <input checked="" type="checkbox"/> Products of Collateral are also covered.         </div> <div style="text-align: right;">           5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:            _____            _____            _____            _____            _____            _____            _____         </div> </div>		
6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so) <input type="checkbox"/> already subject to a security interest in another jurisdiction when it was brought into this state. <input type="checkbox"/> already subject to a security interest in another jurisdiction when debtor's location changed to this state. <input type="checkbox"/> which is proceeds of the original collateral described above in which a security interest is perfected. <input type="checkbox"/> acquired after a change of name, identity or corporate structure of debtor <input type="checkbox"/> 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 \$ <u>7,365.82</u> Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ <u>26.10</u>
Signature(s) of Debtor(s)  Signature(s) of Debtor(s)		8. <input type="checkbox"/> 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)
Type Name of Individual or Business		Signature(s) of Secured Party(ies) or Assignee  Signature(s) of Secured Party(ies) or Assignee  Type Name of Individual or Business