

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

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM
Registrars, 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="font-family: cursive; font-size: 1.2em; margin-top: 10px;"> UNION STATE BANK 15 NO 20TH ST PELL CITY, AL 35121 </div>		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office <div style="text-align: center; font-size: 1.5em; font-weight: bold; transform: rotate(-90deg); transform-origin: center;"> Inst # 1994-36836 </div> <div style="text-align: center; font-size: 1.2em; font-weight: bold; transform: rotate(-90deg); transform-origin: center;"> 12/19/1994-36836 09:46 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 1620 001 HCD </div>
2. Name and Address of Debtor (Last Name First if a Person) <div style="font-family: cursive; font-size: 1.2em; margin-top: 10px;"> WHITE, LARRY D SR P.O. Box 216 SILURIA, AL 35144 </div>		FILED WITH:
Social Security/Tax ID # _____		
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. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) <div style="font-family: cursive; font-size: 1.2em; margin-top: 10px;"> Union State Bank P.O. Box 647 Pell City, AL 35125 </div>		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-family: cursive; font-size: 1.2em; margin-top: 10px;"> ONE 83-2250-5 REF. Model RT18B MX AW00 Serial EL5044250 </div>		
Check X if covered: <input type="checkbox"/> Products of Collateral are also covered. JOP, Shelby County		
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>782.10</u> Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ <u>1.20</u> 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)
<div style="font-family: cursive; font-size: 1.5em; margin-top: 10px;"> Larry D. White Sr. </div>		Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6)
Signature(s) of Debtor(s) <div style="font-family: cursive; font-size: 1.5em; margin-top: 10px;"> Larry D. White, Sr. </div>		Signature(s) of Secured Party(ies) or Assignee <div style="font-family: cursive; font-size: 1.5em; margin-top: 10px;"> Barbara Deffen - Asst. Cashier </div>
Type Name of Individual or Business Larry D. White, Sr.		Type Name of Individual or Business Union State Bank