Return copy or recorded original to:	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
MASTERGUARD REGION OFFICE	
P O BOX 885	
COLUMBUS GA 31902-0885	
Pre-paid Acct. #	
(42)(16 Bitt Address of Debtor (Last Hame this Ha Ferson)	
FREEMAN, JEFFREY WAYNE	m _ @
1360 HWY 9	
WILSONVILLE AL 35186	
Social Security/Tax ID #	第一条
A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)	
FREEMAN, NICOLE WRIGHT	
1360 HWY 9	
WILSONVILLE AL 35186	
£	
Social Security/Tax ID #	FILED WITH:
Additional debtors on attached UCC-E	,
NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
MASTERGUARD REGION OFFICE	
P O BOX 885	
COLUMBUS GA 31902-0885	
Social Security/Tax ID #	
Additional secured parties on attached UCC-E The Financing Statement Covers the Following Types (or items) of Property:	<u> </u>
· · · · · · · · · · · · · · · · · · ·	
3 HEAT DETECTORS	
2 380T SMOKE DETECTORS	5A. Enter Code(s) From
	Back of Form That Best Describes The
	Collateral Covered By This Filling:
	<u>300</u>
·	
	
Check X if covered: Products of Collateral are also covered. This statement is filed without the debtor's signature to perfect a security interest in collateral	7. Complete only when filing with the Judge of Probate:
(check: X, if so) already subject to a security interest in another jurisdiction when it was brought into this state.	The initial indebtedness secured by this financing statement is \$
already subject to a security interest in another jurisdiction when debtor's location changed to this state.	Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 2.85
which is proceeds of the original collateral described above in which a security interest is	8. 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)
perfected. acquired after a change of name, identity or corporate structure of debtor	Signature(s) of Secured Party(ies)
as to which the filing has lapsed.	(Required only if filed without debtor's Signature — see Box 6)
	MM_SCUIII
Signature(s) of Debtor(s)	Signature(s) of Secured Party(les) or Assignee JOHN SLUDER-REGION OFFICE MANAGER
Signature(s) of Debtor(s)	Signature(s) of Secured Party(ies) or Assignee
Type Name of Individual or Business	Type Name of Individual or Business
FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY-ACKNOWLEDGEMENT	STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-1
T T	(5) FILE COPY DEBTOR(S) Approved by The Secretary of State of Alabama
FILING OFFICER COPY - NUMERICAL (4) FILE COPY - SECURED	•

filing pursuant to the Uniform Commercial Code.

as defined in ALA COSE 7.5 (July).

Sheets Presented: