

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

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM
Register, Inc.
114 PIERCE ST.
P.O. BOX 218
ANDOKA, 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="margin-left: 20px;"> Magnolia Federal Bank for Savings P O Box 1858 Hattiesburg, MS 39403-1858 </div>		<div style="font-size: x-small;">THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office</div> <div style="font-size: 2em; transform: rotate(-90deg); transform-origin: center;">Inst # 1997-00724</div> <div style="font-size: 2em; transform: rotate(-90deg); transform-origin: center;">01/08/1997-00724</div> <div style="font-size: 2em; transform: rotate(-90deg); transform-origin: center;">12:10 PM CERTIFIED</div> <div style="font-size: 2em; transform: rotate(-90deg); transform-origin: center;">SHELBY COUNTY JUDGE OF PROBATE</div> <div style="font-size: 2em; transform: rotate(-90deg); transform-origin: center;">001 MCD</div>
2. Name and Address of Debtor (Last Name First if a Person) <div style="margin-left: 20px;"> LAWLER, Debra P O Box 856 Pell City, AL 35125 </div>		
Social Security/Tax ID # _____ 2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) <div style="margin-left: 20px;"> LAWLER, Rebecca P O Box 856 Pell City, AL 35125 </div>		
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="margin-left: 20px;"> Magnolia Federal Bank for Savings P O Box 1858 Hattiesburg, MS 39403-1858 </div>		FILED WITH: <div style="text-align: center; font-size: 1.2em;">Shelby County</div>
Social Security/Tax ID # [REDACTED] <input type="checkbox"/> Additional secured parties on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person) <div style="margin-left: 20px;"> _____ </div>
5. The Financing Statement Covers the Following Types (or items) of Property: <div style="margin-left: 20px;"> One 1986 ----- Dynasty Serial # 827 </div>		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Check X if covered: <input type="checkbox"/> Products of Collateral are also covered. 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 checked="" type="checkbox"/> as to which the filing has lapsed. </div> <div style="width: 35%;"> 7. Complete only when filing with the Judge of Probate. The initial indebtedness secured by this financing statement is \$ <u>3,595.06</u> Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ <u>5.39</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> </div>		
Signature(s) of Debtor(s) _____ Signature(s) of Debtor(s) _____ Type Name of Individual or Business		Signature(s) of Secured Party(ies) <small>(Required only if filed without Debtor's Signature — see Box 6)</small> <div style="margin-left: 20px;"> Executive Vice President Magnolia Federal Bank for Savings Type Name of Individual or Business </div>