

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

Important: Read Instructions on Back Before Filling out Form.

PULL-A-PART BUSINESS FORMS
14214 INDIANA AVE., CHICAGO, IL 60627
PHONE 1-800-441-1020

<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: SECURITY MUTUAL FINANCIAL SERVICES, INC. 1021 MAIN STREET P.O. BOX 818 GARDENDALE, AL 35071-0818		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct. # <u>0</u>			
2. Name and Address of Debtor (Last Name First if a Person) LAWSON SR., THOMAS W 44 MILLER DRIVE VINCENT, AL 35178		<div style="transform: rotate(-90deg);">Inst # 1997-05694</div> <div style="transform: rotate(-90deg);">02/24/1997-05694 09:42 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 19.80 001 MCD</div>	
Social Security/Tax ID # [REDACTED]			
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) SECURITY MUTUAL FINANCIAL SERVICES, INC. 1021 MAIN STREET P.O. BOX 818 GARDENDALE, AL 35071-0818		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
Social Security/Tax ID # [REDACTED]			
<input type="checkbox"/> Additional secured parties on attached UCC-E			
5. The Financing Statement Covers the Following Types (or items) of Property:			
10X20 PROTABLE STORAGE BLDN.			
SA. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: <u>600</u>			
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 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>1400.00</u> Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ <u>17.80</u> $1400.00 + 15.00 = 1415.00$ $1415.00 + 19.80 = 1434.80$	
Signature(s) of Debtor(s) Thomas W. Lawson Sr		Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6) Don Chait	
Type Name of Individual or Business LAWSON SR., THOMAS W		Type Name of Individual or Business SECURITY MUTUAL FINANCIAL SERVICES, INC.	