



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

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

<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.
<b>1. Return copy or recorded original to:</b>  Mutual Savings Credit Union 3596 Pelham Parkway Pelham, AL 35124  Pre-paid Acct. # _____		<div style="transform: rotate(-90deg); transform-origin: center;">Inst # 1997-14440</div> <div style="transform: rotate(-90deg); transform-origin: center;">05/09/1997-14440</div> <div style="transform: rotate(-90deg); transform-origin: center;">08:20 AM CERTIFIED</div> <div style="transform: rotate(-90deg); transform-origin: center;">SHELBY COUNTY JUDGE OF PROBATE</div> <div style="transform: rotate(-90deg); transform-origin: center;">001 MCD 15.00</div>
<b>2. Name and Address of Debtor</b> (Last Name First if a Person)  Brogden, Kim P O Box 102 Siluria, AL 35144  Social Security/Tax ID # _____		
<b>2A. Name and Address of Debtor</b> (IF ANY) (Last Name First if a Person)     Social Security/Tax ID # _____		
<input type="checkbox"/> Additional debtors on attached UCC-E		
<b>3. NAME AND ADDRESS OF SECURED PARTY</b> (Last Name First if a Person)  Mutual Savings Credit Union 3596 Pelham Parkway Pelham, AL 35124  Social Security/Tax ID # _____		<b>4. ASSIGNEE OF SECURED PARTY</b> (IF ANY) (Last Name First if a Person)     <b>FILED WITH:</b>
<input type="checkbox"/> Additional secured parties on attached UCC-E		<b>5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:</b> <div style="display: flex; justify-content: space-between;"><div>300</div><div>_____</div></div> <div style="display: flex; justify-content: space-between;"><div>_____</div><div>_____</div></div> <div style="display: flex; justify-content: space-between;"><div>_____</div><div>_____</div></div> <div style="display: flex; justify-content: space-between;"><div>_____</div><div>_____</div></div> <div style="display: flex; justify-content: space-between;"><div>_____</div><div>_____</div></div> <div style="display: flex; justify-content: space-between;"><div>_____</div><div>_____</div></div>
<b>5. The Financing Statement Covers the Following Types (or items) of Property:</b>  1) Stock Trailer Model# 20GN-MT Serial # 1C9TB220XR1147191		
<input type="checkbox"/> Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.		<b>7. Complete only when filing with the Judge of Probate:</b> The initial indebtedness secured by this financing statement is \$ _____  Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ _____
<b>6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so)</b> <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.		<b>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)</b>
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"> Signature(s) of Debtor(s)  Kim Brogden Type Name of Individual or Business</div><div style="width: 45%;"> Signature(s) of Secured Party(ies) or Assignee  Mutual Savings Credit Union Type Name of Individual or Business</div></div>		<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><b>(1) FILING OFFICER COPY - ALPHABETICAL</b> <b>(2) FILING OFFICER COPY - NUMERICAL</b></div><div style="width: 45%;"><b>(3) FILING OFFICER COPY-ACKNOWLEDGEMENT</b> <b>(4) FILE COPY - SECURED</b></div></div> <div style="text-align: center;"><b>(5) FILE COPY DEBTOR(S)</b></div>

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-1  
Approved by The Secretary of State of Alabama

TO REORDER FROM C U FORMS 1-800-846-8374