

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

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

RECORDED FROM  
REGISTERED, Inc.  
514 PIERCE ST.  
P.O. BOX 258  
ANDALUSIA, AL 36821  
(618-421-1713)

☐ 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:

Agricredit Acceptance Company  
P.O. Box 7902  
Des Moines, IA 50322-9402

Pre-paid Acct. #

2. Name and Address of Debtor (Last Name First if a Person)

Boothe, Wade R.  
2047 Little WH Cir  
Pelham, AL 35124

Social Security/Tax ID #

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)

Social Security/Tax ID #

☐ Additional debtors on attached UCC-E

3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)

Bannister Tractor  
570 Bannister Lane  
Oxford, AL 36203

Social Security/Tax ID #

☐ Additional secured parties on attached UCC-E

5. The Financing Statement Covers the Following Types (or items) of Property:

1 AM 283 S Knorr Disc Mower  
S/N 3.87058

6181.96

Check X if covered: ☐ 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)

- ☐ already subject to a security interest in another jurisdiction when it was brought into this state.  
☐ already subject to a security interest in another jurisdiction when debtor's location changed to this state.  
☐ which is proceeds of the original collateral described above in which a security interest is perfected.  
☐ acquired after a change of name, identity or corporate structure of debtor  
☐ as to which the filing has lapsed.

Signature(s) of Debtor(s)

Signature(s) of Debtor(s)

Type Name of Individual or Business

THIS SPACE FOR USE OF FILING OFFICER  
Date, Time, Number & Filing Office

Inst # 1997-26115  
08/15/1997-26115  
12:20 PM CERTIFIED  
SHELBY COUNTY JUDGE OF PROBATE  
001 SNA 19.65

FILED WITH:

4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

AGRICREDIT ACCEPTANCE COMPANY  
P.O. Box 7902  
Des Moines, IA 50322-9402

5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

7. Complete only when filing with the Judge of Probate:  
The initial indebtedness secured by this financing statement is \$ 3099.50  
Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 4.64  
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)

Signature(s) of Secured Party(ies)  
(Required only if filed without debtor's Signature — see Box 6)

Signature(s) of Secured Party(ies) or Assignee

Signature(s) of Secured Party(ies) or Assignee

Type Name of Individual or Business