as defined in ALA CODE 7-9-105(n).	Sheets Presented:	filing pursuant to the	Uniform Commercial Code.	
Return copy or recorded original to:	TNIC	THIS SPACE FOR USE OF FIL Date, Time, Number & Filing C	LING OFFICER Office	
AMERICAN GENERAL FINANCE,	TIAC.			
P.O. BOX 866				
BESSEMER, AL. 35022				
j				
Pre-paid Acct. #				~
Name and Address of Debtor	(Last Name First if a Person)		<u>0</u>	er iii ee
ROBERTS, KEVIN			€2 €1	
640 CAHABA MANOR DR.			9	
PELHAM, AL: 35124			1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			6	
	•		<u>0</u>	9
Social Security/Tax ID #		·		7 2 2 =
Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		*	C P S
ROBERTS, AUDRA		600	🙀 🐇	< 0
640 CAHABA MANOR DR.		16.00	Ć.	
PELHAM, AL. 35124		6.30	+-4	
· · ·		(20)		
		119.50		
Social Security/Tax ID #		J' /		
Additional debtors on attached UCC-E				•
SECURED PARTY) (Last Name First if a Person)		4. ASSIGNEE OF SECURED	PARTY (IF ANY)	(Last Name First if a Person
AMERICAN GENERAL FINANCE,	INC.			
P.O. BOX 866				
BESSEMER, AL. 35022	•			
Social Security/Tax ID #	•			
Additional secured parties on attached UCC-E				
The Financing Statement Covers the Following Types (or its	ems) of Property:	!	<u> </u>	
TRANE CENTRAL HEAT & CENT M#TXC031C4HPB1 S#M2423H15				
M#TTR030C100A2 S#M0257EWA	AF (CONDENSOR)			SA. Enter Code(s) From Back of Form That
MINTELLOCATION DILLOCATION				Best Describes The Colleteral Gevered
				By This Filling:
LOCATED AT: 640 CAHABA M	ANOR DR.			500 — 明
PELHAM, AL.				
			•	
				<u>-</u>
	••	/	6.30+16.	ののニネス・ヨー
Check X if covered: Products of Collateral are also cov	vered.	^	a wim the comment of Pitterin.	
This statement is filed without the debtor's signature to perform (check X, if so)		The initial indebtedness s	secured by this mancing statemen	10.30
already subject to a security interest in another jurisdiction already subject to a security interest in another jurisdiction	n when it was prought into this state n when debtor's location changed	- 5	ert covert timber to be cut, Crops.	or fixtures and is to be cross
to this state.] which is proceeds of the original collateral described above		indeved in the real estate	ent covers timber to be cut, crops, mortgage records (Describe real e name of record owner in Box 5)	estate and if debtor does not have
perfected.			Signature(s) of Secured Partyl	ies)
acquired after a change of name, identity or colourate strues to which the filling has lapsed	ucarre of decior	(Required	only if filed without debtor's Signa	ture — see Box 6)
1111. IIII IIII	<u> </u>	* AICH	te Murio	
SMahurata) & Dadroott		Signature(s) of Sec	cured Party(ies) or Assignee	<u> </u>
Strawas Roberts	<u></u>		cured Party(iet) Assignee	
Signature(s) of Debtor(s)	1		w Givieral	<u> </u>
Type Name of Individual or Business		Type Name of Indi	ividual or Business	COMMERCIAL CODE — FORM L
(1) FILING OFFICER COPY-ALPI	HABETICAL	001-00060	Approved by The S	ecretary of State of Alabama
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