1. Return copy or recorded original to: FIRST FAMILY FINANCIAL SERVICES, INC 3590 A HWY 31 SOUTH PELHAM, AL 35124	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct #	66 66	33 1 E D
Name and Address of Debtor (Last Name First if a Person)		出品を記
MCDONALD, GERALD	$^{\circ}$	ると呼ばれ
2250 HWY 47	9	96 日
COLUMBIANA, AL 35051	Ď,	σı
Social Security/Tax ID #	. **	15年 18月 18月 18日
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)	T SE I	11 = 50 41 = 50 8EBW
Social Security/Tax ID-#		
Additional debtors on attached UCC-E		•
3. SECURED PARTY (Name and Address of Secured Party)	4. ASSIGNEE OF SECURED PARTY (Name and Address of A	
FIRST FAMILY FINANCIAL SERVICES, INC 3590 A HWY 31 SOUTH PELHAM, AL 35154 Social Security/Tex to 1 Additional secured parties on attached UCC-E		
The Financing Statement Covers the Following Types (or items) of Property:		
QUASAR VCR SONY STEREO		
CRAFTSMEN RIDING LAWNMOWER		
		A. Enter Code(s) From Back of Form That Best Describes The Collaterat Covered By This Filling: 6 0 0 ———————————————————————————————
Check X if covered: Products of Collateral are also covered. This statement is filled without the debtor's sign statement.	• •	
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.	 Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is 	s 1100.00
to this state.	Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 1.65	
which is proceeds of the original collateral described above in which a security interest is perfected.	8. This financing statement covers timber to be cut, crops, or findexed in the real estate mortgage records (Describe real estate indexed in the real estate mortgage).	ixtures and is to be cross ite and if debtor does not have
acquired after a change of name, identity or corporate structure of debtor as to which the filing has lapsed.	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	<u> </u>
Signature(s) Opptor(s)		
Denild Willowald	Signature(s) of Secured Party(ies) or Assignee	<u> </u>
Signature (3) Or Debtor(s) GERALD MCDONALD	Signature(s) of Secured Party(ies) or Assignee	
Type Name of Individual or Business	FIRST FAMILY FINANCIAL SKR	WICES, INC
FILING OFFICER COPY NI MEDICAL (A) EN E COPY OFFICER	STANDARD FORM — UNIFORM COM Approved by The Secretary	MMERCIAL CODE — FORM USE ary o' State of Alabama

This FINANCING STATEMENT is presented to a Filing Officer for liting pursuant to the Uniform Commercial Code

as defined in ALA CODE 7-9-105(n).

Sheets Presented