

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

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

REORDER FROM  
**Register, Inc.**  
314 PIERCE ST.  
P.O. BOX 218  
ANOKA, MN. 55303  
(612) 421-1713

52402

<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:  <div style="margin-left: 20px;">Central State Bank P.O. Box 180 Calera, AL 35040</div>		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office  <div style="font-size: 18pt; transform: rotate(-90deg); transform-origin: center;">Inst # 1999-02410</div> <div style="font-size: 18pt; transform: rotate(-90deg); transform-origin: center;">01/19/1999-02410</div> <div style="font-size: 18pt; transform: rotate(-90deg); transform-origin: center;">01:31 PM CERTIFIED</div> <div style="font-size: 18pt; transform: rotate(-90deg); transform-origin: center;">SHELBY COUNTY JUDGE OF PROBATE</div> <div style="font-size: 18pt; transform: rotate(-90deg); transform-origin: center;">001 CRH 34.05</div>
2. Name and Address of Debtor (Last Name First if a Person)  <div style="margin-left: 20px;">Karen T. Shanks 107 Pecan Lane Calera, AL 35040</div>		
Social Security/Tax ID # _____ 2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)  <div style="margin-left: 20px;">Kenneth P Wilson 107 Pecan Lane Calera, AL 35040</div>		
Social Security/Tax ID # _____ <input type="checkbox"/> Additional debtors on attached UCC-E		
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)  <div style="margin-left: 20px;">Central State Bank P.O. Box 180 Calera, AL 35040</div>		FILED WITH:  <div style="text-align: center; font-weight: bold; font-size: 12pt;">SHELBY COUNTY JUDGE OF PROBATE</div>
Social Security/Tax ID # _____ <input type="checkbox"/> Additional secured parties on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

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

1986 Mays 14 X 70 Mobile Home

Check X if covered: ☐ Products of Collateral are also covered.

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


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>12,618.00</u> Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ <u>34.05</u> 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)
Signature(s) of Debtor(s) <div style="margin-left: 20px;"><i>Karen T. Shanks</i></div> Signature(s) of Debtor(s) <div style="margin-left: 20px;"><i>X Kenneth P Wilson</i></div> Type Name of Individual or Business	Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6) <div style="margin-left: 20px;"><i>Mary Baker</i></div> Signature(s) of Secured Party(ies) or Assignee <div style="margin-left: 20px;">Central State Bank</div> Type Name of Individual or Business