

# 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.**  
514 PIERCE ST.  
P.O. BOX 218  
ANOKA, MN. 55303  
(612) 421-1713

47172

|  |                                     |  |
|--|-------------------------------------|--|
| <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:<br><br>CENTRAL STATE BANK<br>P.O. BOX 180<br>CALERA, AL 35040<br><br>Pre-paid Acct # _____                                     |                                     | THIS SPACE FOR USE OF FILING OFFICER<br>Date, Time, Number & Filing Office<br><br><div style="transform: rotate(-90deg); transform-origin: center;">                         Inst. # 1999-29471                     </div> <div style="transform: rotate(-90deg); transform-origin: center;">                         07/14/1999-29471<br/>                         10:41 AM CERTIFIED<br/>                         SHELBY COUNTY JUDGE OF PROBATE<br/>                         001 CRH 16.20                     </div> |
| 2. Name and Address of Debtor (Last Name First if a Person)<br><br>JOE MONTGOMERY<br>P.O. BOX 662<br>COLUMBIANA, AL 35040<br><br>Social Security/Tax ID # _____        |                                     |  |
| 2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)<br><br>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)<br><br>CENTRAL STATE BANK<br>P.O. BOX 180<br>CALERA, AL 35040<br><br>Social Security/Tax ID # _____ |                                     | FILED WITH:<br><br>SHELBY COUNTY JUDGE OF PROBATE  |
| <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:

1973 MASTER CRAFT MOBILE HOME

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

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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.

7. Complete only when filing with the Judge of Probate:  
 The initial indebtedness secured by this financing statement is \$ 764.70  
 Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 16.20

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 Debtor(s)

Signature(s) of Debtor(s)

Type Name of Individual or Business

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