

FINANCING STATEMENT — FOLLOW INSTRUCTIONS CAREFULLY

This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional)	B. FILING OFFICE ACCT. # (optional)
C. RETURN COPY TO: (Name and Mailing Address)	
D. OPTIONAL DESIGNATION (if applicable): LESSOR/LESSEE ☐ CONSIGNOR/CONSIGNEE ☐ NON-UCC FILING ☐	

Inst # 1999-36671

09/01/1999-36671
09:06 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
16.00
002 MMS

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b)

1a. ENTITY'S NAME Stephen W. Brooks	FIRST NAME Stephen	MIDDLE NAME W.	SUFFIX
OR 1b. INDIVIDUAL'S LAST NAME Brooks	CITY Alabaster	STATE AL	COUNTRY 35007
1c. MAILING ADDRESS 108 Sterling Gate Dr.	1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	1g. ENTITY'S ORGANIZATIONAL I.D.#, if any ☐ NONE	
1d. S.S. OR TAX I.D.#	1e. TYPE OF ENTITY OPTIONAL ADD'NL INFO RE ENTITY DEBTOR		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b)

2a. ENTITY'S NAME	FIRST NAME	MIDDLE NAME	SUFFIX
OR 2b. INDIVIDUAL'S LAST NAME Brooks	Jacqueline	D.C.	
2c. MAILING ADDRESS 108 Sterling Gate Dr	CITY Alabaster	STATE AL	COUNTRY 35007
2d. S.S. OR TAX I.D.#	2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	2g. ENTITY'S ORGANIZATIONAL I.D.#, if any ☐ NONE	
2e. TYPE OF ENTITY OPTIONAL ADD'NL INFO RE ENTITY DEBTOR			

3. SECURED PARTY'S (ORIGINAL S/P or ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME - insert only one secured party name (3a or 3b)

3a. ENTITY'S NAME Scott Credit Union	FIRST NAME	MIDDLE NAME	SUFFIX
OR 3b. INDIVIDUAL'S LAST NAME			
3c. MAILING ADDRESS 1100 Bettline Rd.	CITY Collinsville	STATE IL	COUNTRY 62234

4. This FINANCING STATEMENT covers the following types or items of property:

\$9762.76

5. CHECK BOX ☐ This FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest (a) in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or (b) in accordance with other statutory provisions (additional data may be required)	7. If filed in Florida (check one) ☐ Documentary stamp tax paid ☐ Documentary stamp tax not applicable
6. REQUIRED SIGNATURE(S) Scott Credit Union by Brian J. Buckingham	8. ☐ This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Attach Addendum (if applicable)
	9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) (ADDITIONAL FEE) (optional) ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2

FINANCING STATEMENT ADDENDUM — FOLLOW INSTRUCTIONS

THIS SPACE FOR USE OF FILING OFFICER

AdA. NAME OF FIRST DEBTOR ON RELATED FINANCING STATEMENT

ENTITY'S NAME

OR
 INDIVIDUAL'S LAST NAME: Brooks
 FIRST NAME: Stephen
 MIDDLE NAME, SUFFIX: W

AdB. MISCELLANEOUS:

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Ad1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (Ad1a or Ad1b)

Ad1a. ENTITY'S NAME
 OR
 Ad1b. INDIVIDUAL'S LAST NAME: Brooks
 FIRST NAME: Jacqueline
 MIDDLE NAME: D.C
 SUFFIX:
 Ad1c. MAILING ADDRESS: 108 Sterling Gate Dr
 CITY: Alabaster
 STATE: AL
 COUNTRY:
 POSTAL CODE: 35007
 Ad1d. S.S. OR TAX I.D.#
 Ad1e. TYPE OF ENTITY
 Ad1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION
 Ad1g. ENTITY'S ORGANIZATIONAL I.D.#, if any ☐ NONE

Ad2. ADDITIONAL SECURED PARTY'S EXACT FULL LEGAL NAME - insert only one name (Ad2a or Ad2b)

Ad2a. ENTITY'S NAME
 OR
 Ad2b. INDIVIDUAL'S LAST NAME: Scott Credit Union
 FIRST NAME:
 MIDDLE NAME:
 SUFFIX:
 Ad2c. MAILING ADDRESS: 1100 Beltline Rd.
 CITY: Collinsville
 STATE: IL
 COUNTRY:
 POSTAL CODE: 62234

Ad3a. ☐ This FINANCING STATEMENT covers timber to be cut, minerals, or mineral-related accounts, or is filed as a fixture filing
 Ad3b. ☐ This FINANCING STATEMENT covers crops growing or to be grown on the real estate described below
 Ad4. Description of real estate:

Ad7. Additional collateral description:

Ad5. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

Ad6. REQUIRED SIGNATURE

Ad8. ☐ Debtor is a TRANSMITTING UTILITY (if applicable)