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

Important: Read Instructions on Back Before Filling out Form.

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☐ 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 filing pursuant to the Uniform Commercial Code.	for
ALABAMA TELCO CREDIT UNION 3439 COLONNADE PKWY SUITE 100 BIRMINGHAM AL 35243		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct. #	I I	nst * 2000-05318	02/22/2000-05318 19:16 AM CERTIFIED SELBY COUNTY JUNGE OF PROBATE DOI COL 15.00
CHARLES T. MILLS 2116 KING CHARLES ALABASTER AL 3500 Social Security/Tax ID #			•
Additional debtors on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (L	ast Name First if a Person)
ALABAMA TELCO CRE 3439 COLONNADE PK BIRMINGHAM AL 352 Sociel Security/Tax ID #	WY SUITE 100		
Additional secured parties on attached UCC-E			
1998 NEW - MARINE SN #0G 1998 NEW - PROCRA SN #14 *MOTORG	FT 180 BASS BOAT LO3751H798 R 150HP EFI MOTOR 637732 FT TRAILER YBCAB1XWTO72005 UIDE TROLLING MOTOR 24707 GBIRD 100 SX DEPTHE	8 8 8 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Inter Code(s) From lack of Form That lest Describes The collateral Covered by This Filing:
		-	
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 \$	
		Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6)	
Signature of Debtor(s) Signature of Debtor(s) Type Name of Individual or Business		Signature(s) of Recured Party(res) assignment CHARLES I. HILLS Type Name of Individual or Business	MEDICIAL CODE FORMALICO 1
./	SHAND OFFICER CORY ACKNOWLEDGEMENT	STANDARD FORM — UNIFORM COM	MERCIAL CODE - FORM OCC.1

(5) FILE COPY DEBTOR(S)

Approved by The Secretary of State of Alabama

(3) FILING OFFICER COPY — ACKNOWLEDGEMENT (4) FILE COPY — SECOND PARTY(S)

(1) FILING OFFICER COPY — ALPHABETICAL (2) FILING OFFICER COPY — NUMERICAL