The Debtor is a transmitting utility	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing Office filing pursuant to the Uniform Commercial Code.	cer for	
as defined in ALA CODE 7-9-105(n). 1. Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Officer		
UNION STATE BANK 2267 PELHAM PARKWAY PELHAM, AL 35124			•	•
Pre-paid Acct #				
2. Name and Address of Debtor ANDREW LESLIE LATHAM 511 LAUREL WOODS TRAIL	(Last Name First if a Person)		0 0 0	日日日
HELENA, AL 35080			<u> </u>	11年12日
Social Security/Tax ID#			00	台马
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		Inst # 2	16/08/20 1.20 AM SHELBY COUNTY SHELBY COUNTY SHELBY COUNTY
Social Security/Tax ID#	·		, - ,	- 7
☐ Additional debtors on attached UCC-E				
3. Name and Address of Secured Party	<u> </u>	Name and Address of Assignee of Secured Party	IF ANY)	
UNION STATE BANK 2267 PELHAM PARKWAY PELHAM, AL 35124 Social Security/Tax ID#				
Additional secured parties on attached UCC-E	oment bearing File No. 2000-0	10156		
5. XX This statement refers to original Financing State SHELBY COUNTY JU		Date Filed 03-23	. 19 2000	
6. Continuation. The original financing statements. 7. XX Termination. Secured Party no longer claims. 8. Partial or The Secured Party's right under property described in item 11 or Assignment. Whose name and address appearance extrement hearing file.	nt between the foregoing Debtor and Sec is a security interest under the financing s or the financing statement bearing file nu- or to all of the property listed on this file,	et forth in item 11.		
1998 YAMAHA 4 WHEEL OFF ROAD VEHICLE 229 cc vin#JY448DW01WA348921			Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:	t e
		_ Λ		
Check X if covered: Products of Collateral and	8 also covered.	Signature(s)\of Secured Party(ies)	Libst	Cashi
Signature(s) of Debtor(s)		/ <u> </u>	<u>. </u>	
Signature(s) of Debtor(s) (necessary only if iter	m 9 is applicable)	Signature(s) of Secured Party(les) UNION STATE BANK Type Name of Individual or Business		
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (3) FILIN (2) FILING OFFICER COPY - NUMERICAL (4) FILE	G OFFICER COPY - ACKNOWLEDGEMENT COPY - SECURED PARTY(S) (5)	STANDARD FORM - UNIFORM STANDARD FORM - UNIFORM	M COMMERCIAL CO	DE - FORM UCC-3