131747

95315	Read Instructions							
The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:		This FINANCI	ING STATEMENT is	presented to a	Filing Officer to	7	
* KEYBANK USA, NA 4910 TIEDEMAN RD BROOKLYN, OH 44144		THIS S Dale, T		OF FILING OFFICE	mmercial Code.			
Pre-paid Acct. #								
	(Last Name First if a Person)				4	514 IED	MTE
EICHLBERGER ALBERT W 321 10TH ST., S.W. ALABASTER, AL 35007					() 	-24 TIF	F PROBATE
						200 200	000- CER	JUDGE OF 54.
Social Security/Tax ID #	(Last Name First if a Person)					#	1/2 AM	COUNTY
						Inst	07/2 11:46	SHELBY C
Social Security/Tax ID #		FILED W	ITH:					
Additional debtors on attached UCC-E								
NAME AND ADDRESS OF SECURED PARTY) (Last Name KEYBANK USA, NA 4910 TIEDEMAN RD BROOKLYN, OH 44144	First if a Person)	4. NAME ASSIGI	AND ADDRESS NEE OF SECURED	OF D PARTY	(IF ANY)	(Lest Na	ime First if	a Person)
Social Security/Tax ID #								
5. The Financing Statement Covers the Following Types (or item								
(BOAT) 1989 (ENGINE1) 1993 JOHNSON (ENGINE2) 1998 (TRAILER)	PURSUIT	BW1		SSUB804 320973 4480743				
						5A. Enter Cod Back of Fo Best Desc Collateral By This Fil 6 0 (orm That ribes The Covered ling:	
							- <u>-</u>	
Check Vill covered 🗇 o							- -	
Check X if covered: Products of Collateral are also covered. This statement is filed without the debtor's signature to perfect a (check X, if so)	security interest in collateral	7 Complete	only when filling					- — —
akready subject to a security interest in another jurisdiction when already subject to a security interest in another jurisdiction when to this state.	n it was brought into this state. In debtor's location changed	Mortgage	tax due (15¢ per	with the Judge of I ecured by this finant r \$100.00 or fraction	n thereof) \$	39,48		
which is proceeds of the original collateral described above in viperfected.		8. L. This fin indexed in an interest	ancing stateme the real estate of record, give	ent covers timber to mortgage records (I name of record own	be cut, crops, o Describe real et ner in Box 5	r fixtures and is state and if debi	to be cross or does not	have
as to which the filing has lapsed.	of debtor	·		Signature(s) of S only if filed without o	Secured Destrict	(S) FO — SAA Por 6		
Signatura Ch O		ergn	Lan	ured Party(ies) or As	np			
				rred Party(ies) or As				

Type Name of Individual or Business

(3) FILING OFFICER COPY ACKNOWN EDGESTED

(1) FILING OFFICER COPY - ALPHABETICAL

KEY BANK USA NA/LINDA LOVE
Type Name of Individual or Business