

CC FINANCIA		-1 11 1 3 7					
	NS (front and back) CAREI CONTACT AT FILER [option						
HRISTY BARN	~ .	, , , , , , , , , , , , , , , , , , ,					
SEND ACKNOWLE	GMENT TO: (Name and A	ddress)					
1849 DAT	A TELCO CREDIT U A DRIVE HAM, AL 35244	NION					
				THE ABOVE S	PACE IS	FOR FILING OFFICE USE	EONLY
. INITIAL FINANCING S					1b.	This FINANCING STATEMEN to be filed (for record) (or reco	
	NTY 2001-40220					REAL ESTATE RECORDS.	
	Effectiveness of the Financing S			نساك سال سال سال سين اسي اسي			_;
	: Effectiveness of the Financin Iditional period provided by app	-	with respect to seci	urity interest(s) of the Secu	геа Рапу а	authorizing this Continuation Si	tatement is
ASSIGNMENT (f	ıll or partial): Give name of ass	ignee in item 7a or 7b and ad-	dress of assignee in	item 7c; and also give name	of assign	or in item 9.	
	TY INFORMATION): This A		المسابق والمناب المنابق والمناب والمنابق والمناب	Party of record. Check only			
Also check one of the fo	llowing three boxes and provide	appropriate information in iter	ms 6 and/or 7.				
CHANGE name and name (if name chan	or address: Give current recording) in item 7a or 7b and/or new	i name in item 6a or 6b; also ç address (if address change) ir		LETE name: Give record no be deleted in item 6a or 6b.	ame	ADD name: Complete item 7 item 7c; also complete items	a or 7b, and also 7d-7g (if applicabl
CURRENT RECORD							
6a. ORGANIZATION	SNAME						
S CS INDIVIDUALIS LAST NAME			TEIDST NAME				
R ES INDIVIDUAL'S LA	STNAME		EIRST NAME		IMIDI	DI F NAME	SHEELY
POD. INDIVIDUALS LA	ST NAME		FIRST NAME			DLE NAME	SUFFIX
WALKER			FIRST NAME		MIDI M	DLE NAME	SUFFIX
WALKER	ADDED INFORMATION:		1			DLE NAME	SUFFIX
WALKER CHANGED (NEW) OF	ADDED INFORMATION:		1			DLE NAME	SUFFIX
WALKER CHANGED (NEW) OF	ADDED INFORMATION: S NAME		1		M	DLE NAME	SUFFIX
WALKER  CHANGED (NEW) OF TALORGANIZATION	ADDED INFORMATION: S NAME		LEE		M		
WALKER  CHANGED (NEW) OF TALORGANIZATION	ADDED INFORMATION: S NAME		LEE		M	DLE NAME	
WALKER  CHANGED (NEW) OF TAL ORGANIZATION  R 7b. INDIVIDUAL'S LA	ADDED INFORMATION: S NAME ST NAME		FIRST NAME		MID	TE POSTAL CODE	SUFFIX
WALKER CHANGED (NEW) OF TAL ORGANIZATION R TO INDIVIDUAL'S LA	ADDED INFORMATION: S NAME  ST NAME  IN ADD'L INFO RE 76. TYPE ORGANIZATION DEBTOR		FIRST NAME	OF ORGANIZATION	MID	DLE NAME	SUFFIX
WALKER  CHANGED (NEW) OF  7a. ORGANIZATION  R 7b. INDIVIDUAL'S LA  MAILING ADDRESS  I. TAX ID #: SSN OR E  AMENDMENT (CO	ADDED INFORMATION: S NAME  ST NAME  IN   ADD'L INFO RE   7e. TYPE ORGANIZATION DEBTOR   LATERAL CHANGE): chec	k only <u>one</u> box.	FIRST NAME CITY 7f. JURISDICTION		MID STA	TE POSTAL CODE	SUFFIX
WALKER  CHANGED (NEW) OF  7a. ORGANIZATION  R 7b. INDIVIDUAL'S LA  MAILING ADDRESS  I. TAX ID #: SSN OR E  AMENDMENT (CO	ADDED INFORMATION: S NAME  ST NAME  IN ADD'L INFO RE 76. TYPE ORGANIZATION DEBTOR	k only <u>one</u> box.	FIRST NAME CITY 7f. JURISDICTION		MID STA	TE POSTAL CODE	SUFFIX
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WALKER CHANGED (NEW) OF TAL ORGANIZATION R TO INDIVIDUAL'S LAST AMELING ADDRESS I. TAX ID #: SSN OR E AMENDMENT (CO Describe collateral	ADDED INFORMATION: S NAME  ST NAME  IN   ADD'L INFO RE   7e. TYPORGANIZATION   DEBTOR   LATERAL CHANGE): check deleted or   added, or give   .	k only one box. e entire restated collateral	FIRST NAME  CITY  7f. JURISDICTION  description, or description	cribe collateral assigne	MID STA	TE POSTAL CODE  DRGANIZATIONAL ID #, if any	COUNTRY
WALKER CHANGED (NEW) OF TAL ORGANIZATION R TO INDIVIDUAL'S LAST MAILING ADDRESS I. TAX ID #: SSN OR E AMENDMENT (CO Describe collateral  NAME OF SECURI	ADDED INFORMATION: S NAME  ST NAME  IN   ADD'L INFO RE   7e. TYPE ORGANIZATION DEBTOR   LATERAL CHANGE): chec	k only one box. entire restated collateral	LEE FIRST NAME CITY 7f. JURISDICTION description, or description of description o	eribe collateral assigned	MID STA	TE POSTAL CODE  DRGANIZATIONAL ID #, if any  his is an Amendment authorized	COUNTRY
WALKER CHANGED (NEW) OF TAL ORGANIZATION R TO INDIVIDUAL'S LAST MAILING ADDRESS I. TAX ID #: SSN OR E AMENDMENT (CO Describe collateral  NAME OF SECURI	ADDED INFORMATION: SNAME  ST NAME  IN ADD'L INFO RE 7e. TYPORGANIZATION DEBTOR  LATERAL CHANGE): checked deleted or added, or give the authorizing Debtor, or if this	k only one box. entire restated collateral	LEE FIRST NAME CITY 7f. JURISDICTION description, or description of description o	eribe collateral assigned	MID STA	TE POSTAL CODE  DRGANIZATIONAL ID #, if any  his is an Amendment authorized	COUNTRY
WALKER CHANGED (NEW) OF TAL ORGANIZATION R TO INDIVIDUAL'S LASSES AND AMENDMENT (CO Describe collateral Padds collateral or adds Pa. ORGANIZATION ALABAMA TALABAMA TA	ADDED INFORMATION: SNAME  ST NAME  IN ADD'L INFO RE 7e. TYPORGANIZATION DEBTOR  LATERAL CHANGE): checked deleted or added, or give the authorizing Debtor, or if this	k only one box. entire restated collateral  UTHORIZING THIS AME! is a Termination authorized by	LEE FIRST NAME CITY 7f. JURISDICTION description, or description of description o	eribe collateral assigned	MID STA	TE POSTAL CODE  DRGANIZATIONAL ID #, if any  his is an Amendment authorized	COUNTRY
WALKER CHANGED (NEW) OF TAL ORGANIZATION R 7b. INDIVIDUAL'S LAST MAILING ADDRESS II. TAX ID #: SSN OR E AMENDMENT (CO Describe collateral   NAME OF SECURI adds collateral or adds 9a. ORGANIZATION	ADDED INFORMATION: S NAME  ST NAME  IN ADD'L INFO RE 7e. TYPORGANIZATION DEBTOR  LATERAL CHANGE): checked deleted or added, or give the authorizing Debtor, or if this S NAME  ELCO CREDIT UN	k only one box. entire restated collateral  UTHORIZING THIS AME! is a Termination authorized by	LEE FIRST NAME CITY 7f. JURISDICTION description, or description of description o	eribe collateral assigned	MID STA	TE POSTAL CODE  DRGANIZATIONAL ID #, if any  his is an Amendment authorized	COUNTRY