



A. NAME & PHONE OF CONTACT AT FILER (optional)  B. SEND ACKNOWLEDGMENT TO: (Name and Address)  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names
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OR 16. INDIVIDUAL'S LAST NAME SUFFIX
Johnson Timothy E.
1c. MAILING ADDRESS  1c. MAILING ADDRESS  228 DOVICE DY  MONHOLOUID STATE POSTAL CODE COUNTRY  US
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION DEBTOR NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names
2a. ORGANIZATION'S NAME
26. INDIVIDUAL'S LAST NAME JOHNSON JUNCT MIDDLE NAME SUFFIX
20. MAILING ADDRESS DOULE Dr. CITY MONHEYOULD STATE POSTAL CODE COUNTRY US
2d. TAX ID #: SSN OR EIN TADD'LINFO RE 72e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any ORGANIZATION DEBTOR NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)
3a. ORGANIZATION'S NAME  ALABAMA POWER
OR 3b. INDIVIDUAL'S LAST NAME SUFFIX
3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 600 N. 18TH STREET BIRMINGHAM AL 35291 US
600 N. 18TH STREET  BIRMINGHAM  4. This FINANCING STATEMENT covers the following collateral:  BIRMINGHAM  AL 35291  US
THE FOLLOWING HEAT PUMP, WHICH WAS INSTALLED AT THE RESIDENCE LOCATED ONTHE PROPERTY DESCRIBED IN ITEM 14 OF THIS FINANCING STATEMENT:
BRAND:
M# B3BM-030K-AB M#: FT3BC-030K
5# B3D040206042 S# FTA040201027
\$ 2300.00

5. ALTERNATIVE DESIGNATION [if applicable]	LESSEE/LESSOR CONSI	GNEE/CONSIGNOR BAILER	SELLER/BUYER	AG. LIEN	NON-UCC FILING
This FINANCING STATEMENT is to be file ESTATE RECORDS. Attach Addendum	7 7 1		RCH REPORT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
OPTIONAL FILER REFERENCE DATA					

UCC FINANCING STATEMENT ADDENDUN				
FOLLOW INSTRUCTIONS (front and back) CAREFULLY  9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING ST	ATEMENT			
9a. ORGANIZATION'S NAME				
OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME.	, MIDDLE NAME, SUFFIX			
IONISON Timothi				
10. MISCELLANEOUS:				
		يستمين كريب كريب بالمساجن بالمساجن بالمساجن	ACE IS FOR FILING OF	FICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one 11a. ORGANIZATION'S NAME	name (11a or 11b) - do not abbrev	riate or combine names	<del></del>	<u> </u>
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	Міг	DLE NAME	SUFFIX
,				
11c. MAILING ADDRESS	CITY	STA	ATE POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR EIN   ADD'L INFO RE   11e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	11f. JURISDICTION OF ORGA	NIZATION 11g	ORGANIZATIONAL ID #,	if any
	S NAME - insert only <u>one</u> name	(12a or 12b)		
12a. ORGANIZATION'S NAME				
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIC	DLE NAME	SUFFIX
12c. MAILING ADDRESS	CITY	STA	ATE POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing.  14. Description of real estate:	16. Additional collateral descri	ption:		
15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):				
			· · · · · · · · · · · · · · · · · · ·	
	17. Check only if applicable ar	— — <del>-</del>		
			t to property held in trust	or Decedent's Estate
	18. Check only if applicable ar	•		
	Debtor is a TRANSMITTING Filed in connection with a		saction — effective 30 years	
	Filed in connection with a			-