

Sh  
\$ 35.95



20080117000023400 1/2 \$35.95  
Shelby Cnty Judge of Probate, AL  
01/17/2008 10:59:02AM FILED/CERT

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

ALAGASCO  
#20 South 20th Street  
Birmingham AL 35295

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

1a. ORGANIZATION'S NAME

OR 1b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

Banks

Stannon

K

1c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

147 Chadwick Drive

Helen

AL

35080

1e. TYPE OF ORGANIZATION

1f. JURISDICTION OF ORGANIZATION

1g. ORGANIZATIONAL ID #, if any

☐ NONE

2. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR 2b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

2d. TAX ID #: SSN OR EIN

ADD'L INFO RE ORGANIZATION DEBTOR

2e. TYPE OF ORGANIZATION

2f. JURISDICTION OF ORGANIZATION

2g. ORGANIZATIONAL ID #, if any

☐ 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

OR 3b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

3c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

Alabama Gas Corporation

#20 South 20th Street

Birmingham

AL

35295

4. This FINANCING STATEMENT covers the following collateral:

Rudd Gas Furnace  
Model - 80P507EBR01  
serial - GH5D302F310701370

Rudd condenser  
Model - UAnd-u36CAZ  
serial - 7297M180721589

Acvil  
Model - ACFA-HM36  
17AC  
serial - M38076490

\$ 5271.00

5. ALTERNATIVE DESIGNATION [if applicable]: ☐ LESSEE/LESSOR ☐ CONSIGNEE/CONSIGNOR ☐ BAILEE/BAILOR ☐ SELLER/BUYER ☐ AG. LIEN ☐ NON-UCC FILING  
6. ☐ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable] 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional] ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2  
8. OPTIONAL FILER REFERENCE DATA

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

|                            |            |                     |
|----------------------------|------------|---------------------|
| 9a. ORGANIZATION'S NAME    |            |                     |
| OR                         |            |                     |
| 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX |
| Banks                      | Stannon    | K                   |

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

|                                  |                                   |                           |                                   |
|----------------------------------|-----------------------------------|---------------------------|-----------------------------------|
| 11a. ORGANIZATION'S NAME         |                                   |                           |                                   |
| OR                               |                                   |                           |                                   |
| 11b. INDIVIDUAL'S LAST NAME      | FIRST NAME                        | MIDDLE NAME               | SUFFIX                            |
| 11c. MAILING ADDRESS             |                                   |                           |                                   |
| CITY                             |                                   | STATE                     | POSTAL CODE                       |
| COUNTRY                          |                                   |                           |                                   |
| 11d. TAX ID #: SSN OR EIN        | ADD'L INFO RE ORGANIZATION DEBTOR | 11e. TYPE OF ORGANIZATION | 11f. JURISDICTION OF ORGANIZATION |
| 11g. ORGANIZATIONAL ID #, if any |                                   |                           | <input type="checkbox"/> NONE     |

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

|                               |            |             |             |
|-------------------------------|------------|-------------|-------------|
| 12a. ORGANIZATION'S NAME      |            |             |             |
| OR                            |            |             |             |
| Total Comfort Heating and Air |            |             |             |
| 12b. INDIVIDUAL'S LAST NAME   | FIRST NAME | MIDDLE NAME | SUFFIX      |
| 12c. MAILING ADDRESS          |            |             |             |
| CITY                          |            | STATE       | 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 description:

17. Check only if applicable and check only one box.

Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate

18. Check only if applicable and check only one box.

☐ Debtor is a TRANSMITTING UTILITY

☐ Filed in connection with a Manufactured-Home Transaction — effective 30 years

☐ Filed in connection with a Public-Finance Transaction — effective 30 years

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

Chadwick sector 2  
Lot 20A  
Map Book 17  
Page 127