28.00 \$ 34.30

20080815000328830 1/2 \$34.30 Shelby Cnty Judge of Probate, AL 08/15/2008 11:41:47AM FILED/CERT

UCC FINANCING STATEMENT

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

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

ALABAMA GAS CORPORATION

#20 SOUTH 20TH STREET

BIRMINGHAM, AL 35295

	THE AB	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one de	ebtor name (1a or 1b) - do not abbreviate or combine names	S				
1a. ORGANIZATION'S NAME						
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX			
		TO T	1001117			
BRAINARD	SALLY					
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY			
205 WOODBURY DR	STERRETT	AL 35147	USA			
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGA	ANIZATION 1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if ar	ny			
ZATION			NONE			
آT FULL LEGAL NAME - in	nsert only <u>one</u> debtor name (2a or 2b) - do not abbreviate or	r combine names				
2a. ORGANIZATION'S NAME		· · ·				
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	NAME MIDDLE NAME				
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY			
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGA	ANIZATION 2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if a	ny			
ORGANIZATION ' DEBTOR			NONE			
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNED	E of ASSIGNOR S/P) - insert only <u>one</u> secured party name (3a or 3b)				
3a. ORGANIZATION'S NAME ALABAMA GAS CORPORATION						
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX			
0. AAAU INIO ADDDEOO		OTATE IDOOTAL CODE	COLINTERY			
3c. MAILING ADDRESS		STATE POSTAL CODE A L 35295	COUNTRY			
#20 SOUTH 20TH STREET	BIRMINGHAM	AL 35295	IUSA			

4. This FINANCING STATEMENT covers the following collateral:

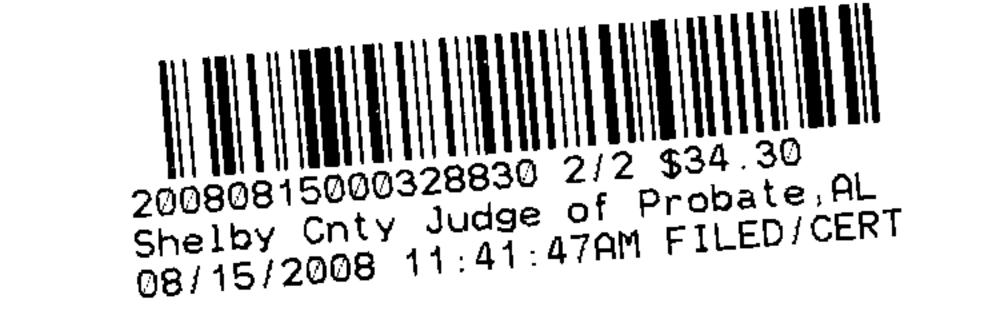
TON FURNACE M#GMH80904BN S#0801622697

3 TON COIL M#CAPF3642C6 S# 0806027445

3 TON CONDENSING UNIT M#GSC130421 S#0807019253

\$4200°°)

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 ESTATE RECORDS. Attach Addendum	[for record] (or recorded) in	n the REAL 7. Check to REC [if_applicable] [ADDITIONAL	(UEST SEARCH REPO (FEE)	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA						



OLLOW INSTRUCTIONS (front and back) NAME OF FIRST DEBTOR (1a or 1b) C		STATEMENT			
9a ORGANIZATION'S NAME					
9b. INDIVIDUAL'S LAST NAME BRAINARD	FIRST NAME SALLY	MIDDLE NAME, SUFFIX E			
), MISCELLANEOUS:					
I. ADDITIONAL DEBTOR'S EXACT FULL	LEGAL NAME - insert only		· · · · · · · · · · · · · · · · · · ·	IS FOR FILING OFF	ICE USE ONLY
11a. ORGANIZATION'S NAME					
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME	
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATIO	N 11f. JURISDICTION OF ORGANIZATIO	N 11g. OR	GANIZATIONAL ID #, if a	any No
12a. ORGANIZATION'S NAME		/P'S NAME - insert only <u>one</u> name (12a or	12b)		
MR. A / C HTG.	& CLG.		· · · · · · · · · · · · · · · · · · ·		
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS 22705 HIGHWAY 5	<u> </u>	WEST BLOCTON	STATE AL	POSTAL CODE 35184	COUNTRY
3. This FINANCING STATEMENT covers tine collateral, or is filed as a X fixture filing. 4. Description of real estate:	nber to be cut or as-extra	ted 16. Additional collateral description:			
LOT 515 OF FORREST DIVISION 5TH SECTO SHELBY COUNTY PROF MAP BOOK 23 PAGE 1	OR FOUND IN BATE OFFICE				
5. Name and address of a RECORD OWNER of (if Debtor does not have a record interest):	above-described real estate				
		17. Check only if applicable and check Debtor is a Trust or Trustee	acting with respect to p	property held in trust or	Decedent's Es
		18. Check only if applicable and check Debtor is a TRANSMITTING UTILIT Filed in connection with a Manufac	Y		