ICC FINANCIN	GSTATEMENT	100.50					
	NS (front and back) CAREFULLY	4'50					
	CONTACT AT FILER [optional]						
CINDY THOMA	·	· · · · · · · · · · · · · · · · · · ·					
SEND ACKNOWLED	GMENT TO: (Name and Address)						
				8 ft			
ALABAMA	GAS CORPORATION						
•	RD ARRINGTON JR BLVD N	201310180004	114990 172	990 1/2 \$32.50 Idge of Probate, AL			
BIRMINGE	IAM, AL. 35203	Shelby Chty ,	Judge of F				
•		10/18/2013 O	1:10:11 PM	1 FILED/CERT			
			00.00.00.00				
			SPACE IS FO	OR FILING OFFICE US	EONLY		
1a. ORGANIZATION'S	FULL LEGAL NAME - insert only one debtor name (1a	or 1b) - do not abbreviate or combine names					
Tu. Orto, in in Extraorto							
16. INDIVIDUAL'S LAST NAME CHAFIN		FIRST NAME	MIDDLE	MIDDLE NAME W			
		CINDY					
			i W		1		
		CITY	STATE	POSTAL CODE	COUNTRY		
MAILING ADDRESS	COURT	·····	,	POSTAL CODE 35080-7142	COUNTRY		
MAILING ADDRESS	COURT ADD'L INFO RE 1e. TYPE OF ORGANIZATION	CITY	STATE				
MAILING ADDRESS		CITY HELENA	STATE	35080-7142	US		
MAILING ADDRESS 0 FALLISTON	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	HELENA 1f. JURISDICTION OF ORGANIZATION	STATE AL 1g. ORG	35080-7142	US		
MAILING ADDRESS	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of	HELENA 1f. JURISDICTION OF ORGANIZATION	STATE AL 1g. ORG	35080-7142	US		
ADDITIONAL DEBT	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of	HELENA 1f. JURISDICTION OF ORGANIZATION	STATE AL 1g. ORG	35080-7142	COUNTRY		
MAILING ADDRESS OF FALLISTON ADDITIONAL DEBT	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of the second sec	HELENA 1f. JURISDICTION OF ORGANIZATION	STATE AL 1g. ORG	35080-7142 SANIZATIONAL ID#, if any	US		
ADDITIONAL DEBT	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of the second sec	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb	AL 1g. ORG	35080-7142 SANIZATIONAL ID#, if any	US		
ADDITIONAL DEBT	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of the second sec	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb	AL 1g. ORG	35080-7142 SANIZATIONAL ID#, if any	SUFFIX		
ADDITIONAL DEBT	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of the second sec	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb	STATE AL 1g. ORG	35080-7142 SANIZATIONAL ID#, if any NAME	SUFFIX		
ADDITIONAL DEBT	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of NAME OR NAME	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb	STATE AL 1g. ORG MIDDLE STATE	35080-7142 SANIZATIONAL ID#, if any NAME	US		
ADDITIONAL DEBT	ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of NAME T NAME	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CITY	STATE AL 1g. ORG MIDDLE STATE	35080-7142 SANIZATIONAL ID #, if any NAME POSTAL CODE	SUFFIX		
MAILING ADDRESS O FALLISTON OF ADDITIONAL DEBTER 2a. ORGANIZATION'S 2b. INDIVIDUAL'S LASS MAILING ADDRESS SECURED PARTY	ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of NAME ADD'L INFO RE ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR "S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR)	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION	STATE AL 1g. ORG MIDDLE STATE 2g. ORG	35080-7142 SANIZATIONAL ID #, if any NAME POSTAL CODE	SUFFIX		
ADDITIONAL DEBTOR 2a. ORGANIZATION'S MAILING ADDRESS SECURED PARTY 3a. ORGANIZATION'S	ADD'L INFO RE ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of NAME ADD'L INFO RE ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR OR NAME OF TOTAL ASSIGNEE OF ASSIGNOR NAME	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION	STATE AL 1g. ORG MIDDLE STATE 2g. ORG	35080-7142 SANIZATIONAL ID #, if any NAME POSTAL CODE	SUFFIX		
MAILING ADDRESS O FALLISTON OF ALLISTON OF ALLISTON OF ALLISTON OF ALLISTON OF ALLISTON OF ALABAMA GRANIZATION'S ALBAMA A	ADD'L INFO RE ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of NAME ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR 'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR NAME AS CORPORATION	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION R S/P) - insert only one secured party name (3a or 3)	STATE AL 1g. ORG STATE AIDDLE 2g. ORG 3b)	NAME POSTAL CODE SANIZATIONAL ID #, if any	SUFFIX		
MAILING ADDRESS O FALLISTON OF ALLISTON OF ALLISTON OF ALLISTON OF ALLISTON OF ALABAMA GRANIZATION'S ALABAMA ALA	ADD'L INFO RE ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of NAME ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR 'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR NAME AS CORPORATION	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION	STATE AL 1g. ORG MIDDLE STATE 2g. ORG	NAME POSTAL CODE SANIZATIONAL ID #, if any	SUFFIX		
MAILING ADDRESS O FALLISTON OF ALLISTON OF ALLISTON OF ALLISTON OF ADDRESS SECURED PARTY 3a. ORGANIZATION'S ALABAMA G	ADD'L INFO RE ORGANIZATION DEBTOR OR'S EXACT FULL LEGAL NAME - insert only one of NAME ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR 'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR NAME AS CORPORATION	HELENA 1f. JURISDICTION OF ORGANIZATION debtor name (2a or 2b) - do not abbreviate or comb FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION R S/P) - insert only one secured party name (3a or 3)	STATE AL 1g. ORG STATE AIDDLE 2g. ORG 3b)	NAME POSTAL CODE SANIZATIONAL ID #, if any	SUFFIX		

WATER HEATER
MODEL #GCV50300
SERIAL #1312A003835

\$1000.00

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

UCC FINANCING STATE	MENT ADDENDU	V				
FOLLOW INSTRUCTIONS (front and beginning) 9. NAME OF FIRST DEBTOR (1a or		TATEMENT			•	
9a. ORGANIZATION'S NAME	TD) ON NEED THANKS					
OR						
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
CHAFIN	CINDY	\mathbf{W}				
10.MISCELLANEOUS:						
			201310	0180004	14990 2/2 \$32.5	
			Shelby	y Chity	Judge of Probat	e, AL
			10718.	/2013 0	1:10:11 PM FILE	D/CERT
			THE ABOVE	E SPACE	IS FOR FILING OFFI	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only or	name (11a or 11b) - do not abbrevi	ate or combine nam	es		
11a. ORGANIZATION'S NAME						
OR			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	······································
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
11d. SEE INSTRUCTIONS ADD'L INFO	RE 11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGAN	JIZATION	11a OR	GANIZATIONAL ID#, if a	inv
Not Applicable ORGANIZA		1				
TOLDION	RTY'S or ASSIGNOR S/F	D'S NAME insert only one name	(12 12 -)			NONE
12. ADDITIONAL SECURED PAI 12a. ORGANIZATION'S NAME	KITS or WASSIGNOR S/F	3 INAIVIE - Insert only one name	(12a or 12b)		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
SOUTHERN PLUMBIN	G AND GAS					
12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
124 MORNING MIST TRA	<u>IL</u>	ALABASTER		AL	35007	US
13. This FINANCING STATEMENT covers	timber to be cut or as-extracte	ed 16. Additional collateral descrip	otion:			
collateral, or is filed as a fixture filir 14. Description of real estate:	ng.		•			
300 FALLISTON COURT						
HELENA, AL. 35080-7142						
111111111111111111111111111111111111111						
LEGAL DESCRIPTION:						
LOT 22						
MAP BOOK 31 MAP PAG						
DEED BOOK 2009 DEED						
SUB DIVISION FALLIST SECTOR	ON KIDGE ZND					
PARCEL #13 5 21 1 004 022	2.000					
SHELBY COUNTY, ALAB						
15. Name and address of a RECORD OWN	ER of above-described real estate					
(if Debtor does not have a record interest	t):					
		17. Check only if applicable and	d check <u>only</u> one bo	X.		
		Debtor is a Trust or T	rustee acting with re	espect to p	roperty held in trust or	Decedent's Estate
		18. Check <u>only</u> if applicable and	i check <u>only</u> one bo	X.		
		Debtor is a TRANSMITTING	UTILITY			
		Filed in connection with a N			·	
		Filed in connection with a F	Public-Finance Trans	saction — e	effective 30 years	