

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 30691 - REDBRICK	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	54367729 ALAL FIXTURE
File with: Shelby, AL	

20160614000205720 1/3 \$34.00
Shelby Cnty Judge of Probate, AL
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THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S SURNAME BERTSCHINGER		FIRST PERSONAL NAME JOSEPH	ADDITIONAL NAME(S)/INITIAL(S) COLLIN	SUFFIX
1c. MAILING ADDRESS 645 MERIWEATHER DR		CITY CALERA	STATE AL	POSTAL CODE 35040	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME BERTSCHINGER		FIRST PERSONAL NAME FANNETRA	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS 645 MERIWEATHER DR		CITY CALERA	STATE AL	POSTAL CODE 35040	COUNTRY USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME REDBRICK FINANCIAL GROUP INC.					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS PO BOX 1719		CITY PORTLAND	STATE OR	POSTAL CODE 97207-1719	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

(1) FURNACE, (1) AIR CONDITIONER OR ANY PARTS OR COMPONENTS INSTALLED IN THE EQUIPMENT, ANY PROCEEDS FROM THE SALE OF THE EQUIPMENT, AND ANY PROCEEDS FROM ANY INSURANCE COVERING THE EQUIPMENT THAT ARE FOR DAMAGE TO OR LOSS OF THE EQUIPMENT

Complete only when filing with the Judge of Probate:

The initial indebtedness secured by this financing statement is \$6,000.00

Mortgage tax due (\$.15 per \$100.00 or fraction thereof) \$9.15

5. Check only if applicable and check only one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:

54367729

REDBRICK

20161559179

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME

BERTSCHINGER

FIRST PERSONAL NAME

JOSEPH

ADDITIONAL NAME(S)/INITIAL(S)

COLLIN

SUFFIX



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10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:
☐ covers timber to be cut ☐ covers as-extracted collateral ☒ is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

Legal Description:
County: SHELBY, AL APN: 28-4-20-1-001-016-073
Census Tract / Block: 305.01 / 3 Alternate APN:
Township-Range-Sect: 22-2W-20 Subdivision:
MERIWEATHER SECTOR 4
Legal Book/Page: 29-93 Map Reference: /
Legal Lot: 103 Tract #:
[See Exhibit for Real Estate]

17. MISCELLANEOUS: 54367729-AL-117 30691 - REDBRICK FINANCIAL G REDBRICK FINANCIAL GROUP INC. File with: Shelby, AL REDBRICK 20161559179

Debtor: BERTSCHINGER, JOSEPH, COLLIN

Exhibit for Real Estate

16. Description of real estate: Continued

Legal Block: School District: 2

Market Area: School District Name: SHELBY COUNTY SCHOOL DISTRICT

Neighbor Code: CV9 Munic/Township: CALERA

SHELBY, AL



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