

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

|                                                |                |        |
|------------------------------------------------|----------------|--------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) |                |        |
| Connie Sorenson                                | (801) 747-7713 | 786547 |
| B. EMAIL CONTACT AT FILER (optional)           |                |        |
| csorenson@medallionbank.com                    |                |        |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)  |                |        |
| MEDALLION BANK                                 |                |        |
| 1100 EAST 6600 SOUTH, SUITE 510                |                |        |
| SALT LAKE CITY, UT 84121                       |                |        |
| FILED IN: SHELBY,AL                            |                |        |



20180807000281670 1/2 \$77.00  
Shelby Cnty Judge of Probate, AL  
08/07/2018 03:55:41 PM FILED/CERT

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 | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX      |         |
| Mitchell                 | James               | Darrell                       |             |         |
| 1c. MAILING ADDRESS      | CITY                | STATE                         | POSTAL CODE | COUNTRY |
| 471 Ballantrae Rd        | Pelham              | AL                            | 35124       | 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 | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX      |         |
|                          |                     |                               |             |         |
| 2c. MAILING ADDRESS      | CITY                | STATE                         | POSTAL CODE | 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       |                     |                               |             |         |
| OR                            |                     |                               |             |         |
| 3b. INDIVIDUAL'S SURNAME      | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX      |         |
|                               |                     |                               |             |         |
| 3c. MAILING ADDRESS           | CITY                | STATE                         | POSTAL CODE | COUNTRY |
| 1100 EAST 6600 SOUTH, STE 510 | SALT LAKE CITY      | UT                            | 84121       | USA     |

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

Inground Pool - Fixture Filing

THE FOLLOWING PROPERTY IS SITUATED IN PELHAM, COUNTY OF PELHAM, STATE OF ALABAMA TO WIT: 471 BALLANTRAE ROAD PELHAM, AL PROPERTY ADDRESS: 471 BALLANTRAE ROAD PLEAHM, AL 35124 PARCEL ID#:

TOTAL VALUE OF COLLATERAL FOR AL RECORDATION TAX IS \$30000.00

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:

# 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

Mitchell

FIRST PERSONAL NAME

James

ADDITIONAL NAME(S)/INITIAL(S)

Darrell

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

USA

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):

Owners: James Darrell Mitchell

16. Description of real estate:

THE FOLLOWING PROPERTY IS SITUATED IN PELHAM ,  
COUNTY OF PELHAM , STATE OF ALABAMA TO WIT: 471  
BALLANTRAE ROAD PELHAM, AL PROPERTY ADDRESS:  
471 BALLANTRAE ROAD PLEAHM, AL 35124 PARCEL ID#:

17. MISCELLANEOUS: