☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is filing pursuant to the Uniform Co	
Return copy or recorded original to	·	THIS SPACE FOR USE OF FILING OFFIC Date, Time, Number & Filing Office	ER
First Alabama Rank			
First Alabama Bank			
P. O. Box 338			
Thorsby, AL 35171			
			• ·
Pre-paid Acct. #			
Name and Address of Debtor	(Last Name First if a Person)		<u>0</u>
McNeel, Billy			ယ္က
P. O. Box 39			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Montevallo, AL 35115			
Social Security/Tax (D #			$\omega = \pm 1$
2A. Name and Address of Debtor (IF AN	(Last Name First if a Person)		
			27
		-	
			·
Social Security/Tax ID #			
Additional debtors on attached UCC-E			
SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)
FIRST ALABA	MA BANK		
P. O. Box 3	338		
Thorsby, AL 3			
Social Security/Tax ID #			
☐ Additional secured parties on attached UCC-E			
5. XX This statement refers to original Financing Sta She1by County	tement bearing File No. 017020 Judge of Probate Off	ice Date Filed	5 - 7 ₁₉ 87
6. Continuation. The original financing statemen	t between the foregoing Debtor and Secured		ill effective.
7. Termination. Secured Party no longer claims	a security interest under the financing statem	ent bearing the file number shown above.	
	er the financing statement bearing file number : or to all of the property listed on this file, is assig		
Assignment. whose name and address appear	ears in item 4.	_	
	e number shown above is amended as set fort ateral described in item 11 from the financing :		
Release number shown above.			
Balance 3,549.38			11A. Enter Code(s) From Back of Form That
60 mos.			Best Describes The Collateral Covered
			By This Filing:
. A . A			
1300			-
<i>y</i> • • • • • • • • • • • • • • • • • • •			
			
			
			
Check X if covered: X Products of Collate	teral are also covered.		
T) (3 ())			
Billy McNeel Signature(s) of Debtor(s)		Signature(s) of Secured Party(ie	D & .
		Deanelle 6	T. Colleson
Signature(s) of Debtor(s) (necessary only if item	9 is applicable)	Signature(s) of Secured Party(ies	-,
Type Name of Individual or Business		Type Name of Individual or Busin	
(1) FILING OFFICER COPY — ALPHABETICAL (3) FILIN	NG OFFICER COPY — ACKNOWLEDGEMENT	STANDAR	D FORM UNIFORM COMMERCIAL CODE FORM UCC-3
LON-188—1/91	COPY - SECOND PARTY(S)	(5) FILE COPY DEBTOR(S)	Approved by The Secretary of State of Alabama
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	+ 1 · ·		