STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

Important: Read Instructions on Back Before Filling out Form.

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☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to filing pursuant to the Uniform Commercial Co	de.	er for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		
Bham Federal Employees Fed	leral C U			
500 South 22nd Street, Rm	213			
Bham, Al 35233				
			<u>, </u>	
Pre-paid Acct. #			**	O H &
Name and Address of Debtor	(Last Name First if a Person)		in M	N T E E
Andrus, Martha K.		•	Ï	m ⊢ ss
William			6	S S S S S S S S S S S S S S S S S S S
3612 Coventry Circle			6	on u ≡
Bham, Al 35243			<u> </u>	せた監異
			•	9,55
Social Security/Tax ID #	// ast Name Signt if a Parman)		换	ておき
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		Ë	世界景
			 	460
•				
Social Security/Tax ID #				
☐ Additional debtors on attached UCC-E				
3. SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF AN)	r) (t	Last Name First if a Person)
Bham Federal Employees Fed	eral C U			
500 South 22nd Street, Rm				
Bham, Al 35233				
Social Security/Tax ID #				
Additional secured parties on attached UCC-E			······································	
5. This statement refers to original Financing Stateme	nt bearing File No. <u>1993–2133</u> 1			
Filed with Shelby County Jud		Date Filed07/21/93	, 19	<u> </u>
 6. Continuation. The original financing statement beto 7. Termination. Secured Party no longer claims a se 8. Partial or The Secured Party's right under the 	- -	bearing the file number shown above.		
☐ Full property described in item 11 or to a Assignment, whose name and address appears in	Il of the property listed on this file, is assigned item 4	d to the assignee		
9. Amendment Financing statement bearing file nun	nber shown above is amended as set forth in			
 Partial Secured Party releases the collatera Release number shown above. 	described in item 11 from the financing state	tement bearing tile		
11.	•	,, <u>,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </u>		
				Enter Code(s) From Back of Form That
•				Best Describes The Collateral Covered
				By This Filing:
				
			•	
·				
Check X if covered: Products of Collateral are also	covered.	the state of	111 11 11	
	·	IMMU I Tred	nom	X
Signature(s) of Debtor(s)		Signature(s) of Secured Party(les)		1
Signature(s) of Debtor(s) (necessary only if item 9 is	applicable)	Signature(s) of Secured Party(ies)		
Type Name of Individual or Dusiness		Bham Federal Employee	s Feder	ral C U
Type Name of Individual or Business	FEICER CORY - ACKNOW! FOREMENT	Type Name of Individual or Business	UCADA COLO	IEDCIAL CODE - EODM LICC-3