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 a Filing C filing pursuant to the Uniform Commercial Code.	fficer for
. Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
City Bank of Childersbu PO Box 349 Childersburg, Al. 3504		Date, Time, Nomber at timing officers	
		ii)	は日間
Pre-paid Acct. #	_		
Name and Address of Debtor	(Last Name First if a Person	on) and	化 打 的 化
Archer, Nelson Wayne			46日景
Archer, Janice		<u> </u>	夏 [2] [5]
1200 County Road 109		5 €	岩を見る
Wilsonville, Al. 35180	6		> 4 書
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		<u>دي</u> م	/ 上 山
Social Security/Tax ID #	NY) (Last Name First if a Pers	OD) C	50 ° 22
A. Name and Address of Debtor (IF A)	(Last Name First in a Fere	~~~ ~	Ö
		•	
			•
Social Security/Tax ID #			•
Additional debtors on attached UCC-E			() Add First If a Base
3. SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
City Bank of Childersb	urg		
PO Box 349	,		
Childersburg, Al. 3504	4		
Social Security/Tax ID # Additional secured parties on attached UCC-E	<u> </u>		
	024239		
5. Data Statement refers to original Financing Statement Judge of Prob	ate. Shelby County	Date Filed 11-15- 19	89
6. Continuation. The original financing statem. 7. Termination. Secured Party no longer clair. 8. Partial or The Secured Party's right und property described in item 11 Assignment. whose name and address ap Financing statement bearing	ent between the foregoing Debtor and Sec ms a security interest under the financing s der the financing statement bearing file nur for to all of the property listed on this file, is	et forth in item 11.	• • • • • • • • • • • • • • • • • • •
11.			
			11A. Enter Code(s) From Back of Form That
			Best Describes The Collateral Covered
			By This Filing:
			300
•			
Check X if covered: Products of Collateral a	are also covered.		
The state of the s			1
Signature(s) of Debtor(s)		Signature(s) of Secured Party(6s)	
			, _
Signature(s) of Debtor(s) (necessary only if it	tem 9 is applicable)	Signature(s) of Secured Party(ies)	·
Signature(s) of Debtor(s) (necessary only if it Type Name of Individual or Business	tem 9 is applicable)		G