## 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.

The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is pre- filling pursuant to the Uniform Comm	sented to a Filing Officer for ercial Code.
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
ALAGASCO			
	•		<b>*</b> =
Pre-peid Acct. #			
2. Name and Address of Deblor	(Last Name First if a Person)		
			Ø 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
MICHAEL H. HULL			の あ出事
KATHRYN J. HULL 902 MASTERS LANE			# 50 = 2 £ £
BIRMIN GHAM, ALABAM	<b>A</b>		
Diffitte Cirili, transfer.	**	-	
Social Security/Tax ID #			Instanta
2A. Name and Address of Debtor (#F ANY)	(Last Name First if a Person)		H 😅 💥
	: 		
Social Security/Tax ID #			
		1	
3. SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)
3. SECURED FRANK (LESS NEWS ) NOT IN A V GISON,			
MODDET F. LITT		ALAGASCO	
NORRELL HTG.			
Social Security/Tax ID #			•
Additional secured parties on attached UCC-E			
5. This statement refers to original Financing Statem	ant bearing File No	#16813	
Flied with SHELBY	<u>-</u>	Date Filed MAY	19 <u>96</u>
6. Continuation. The original financing statement be			fective.
7 🖾 Termination. Secured Party no longer claims a s 8. 🔲 Partial or — The Secured Party's right under the	ecurity interest under the financing statems a financing statement bearing file number s		
☐ Full property described in item 11 or to	all of the property listed on this file, is assig		
Assignment. whose name and address appears  9.  Amendment Financing statement bearing file nu	in nem 4. imber shown above is amended as set forti	h in item 11.	
10. Partial Secured Party releases the collater number shown above.	rat described in Item 11 from the financing	statement bearing file	
11.	<u> </u>		
			11A. Enter Code(s) From
			Back of Form That Best Describes The
			Colleteral Covered  By This Filing:
			<u>500</u>
			<del></del>
			<del></del>
Check X if covered: Products of Colleteral are also	o covered.		<del></del>
		· <u>- · - · · · · · · · · · · · · · · · ·</u>	··
Signature(s) of Debtor(s)		Signature(station Secured Party(les)	<u>, /</u>
Signature(s) of Debtor(s) (necessary only if Item 9 is applicable)		Signature(s) of Secured Party(les)	
Signature(s) or Deposits) (necessary only it liem 9 i		ALAGASCO	
Type Name of Individual or Business		Type Name of Individual or Busines	
		2 IANUAND F	ORM — UNIFORM COMMERCIAL CODE — FORM UCC-3 opproved by The Secretary of State of Alabama