## 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 tre	enemitting utility GODE 7-9-195(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is filling pursuant to the Uniform Con	presented to a Filing Officer to inmercial Code.	or ·
1. Return copy or re	<del></del>		THIS SPACE FOR USE OF FILING OFFICE	·	
Alabama Alabama 600 No: Birmin Attn:  Pre-paid Acct.#_ 2. Name and Address 1124 5:	a Power Companito th 18th Stree gham, AL. 3529 Division Account th Avenue NW ter, Al. 35007	y t 1-1135 nting Services  (Last Name First if a Person) Moore, Charlotte	THIS SPACE FOR USE OF FILING OFFICE Date, Time, Number & Filing Office	·	3.58 PM CERTIFIED SKELBY COUNTY 300G OF PROBATE OOL CAN .OR
Social Security/1	······································				3
	y (Last Name First if a Person)	<u> </u>	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Las	t Name First if a Person)
Social-Security/  Additional secure  This statement Filed with  Continuation.  Partial or	nt refers to original Financing Statement  Shelby County  The original financing statement bet  Secured Party no longer claims a secured Party's right under the	Inting Services  Int bearing File No.  1997-272  Judge of Probate  ween the foregoing Debtor and Secured Pacurity interest under the financing statement financing statement bearing file number sh	Date Filed A116119  Inty, bearing file number shown above, is still to bearing the file number shown above.  The shown above to the	_	- -
Assignment.  9. Amendment  10. Partial	whose name and address appears in Financing statement bearing file nur Secured Party releases the collaters	If of the property listed on this file, is assign in item 4. Inber shown above is amended as set forth I described in item 11 from the financing st	in item 11.		
Release	number shown above.	<u> </u>	·		
	•			Ba Be Co	ter Code(s) From ck of Form That st Describes The flateral Covered This Filing:
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Check X if covere	ed:   Products of Collateral are also	covered.			<del></del>
		· · · · · · · · · · · · · · · · · · ·	1 1:4	4/0	
Signature(s) of	f Debtor(s)	· · · · · · · · · · · · · · · · · · ·	Signature(s) of Secured Party(ies)	) 	······································
Signature(s) of	f Debtor(s) (necessary only if item 9 is	epplicable)	Signature(s) descured Party(les Alabama Power	Company	
Type Name of	Individual or Business	· · · · · · · · · · · · · · · · · · ·	Type Name of Individual or Busin	1855	
	OPY - ALPHABETICAL (3) FILING C	FFICER COPY — ACKNOWLEDGEMENT  PY — SECOND PARTY(S) (	STANDARE 5) FILE COPY DEBTOR(S)	FORM — UNIFORM COMMER Approved by The Secretary of	CIAL CODE — FORM UCC-3 State of Alabama