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.

72599

1 2 3 3 3					(612) 421-1713
☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented		filing pursuant to the U	EMENT is presented to a iniform Commercial Code	Filing Officer for
Return copy or recorded original to		D	HIS SPACE FOR USE OF FILIT ate, Time, Number & Filing Of	NG OFFICER fice	
First Commercial Bank		 			· -
P. O. Box 11746					
Birmingham, Al 35202-1740	6				_
Attn: Helen Ancic					
			•		
Pre-paid Acct. #		'-			
Name and Address of Debtor	(Last Name	e First if a Person)			M H H
M Charles P					9 9 7 7
Turner, Stephen F.					
1101 Shadow Lake Drive Birmingham, Al 35215					一工产量
DILHTHERMS WI 22512					A RAB
					OOE S
•					さ る 型 星
Social Security/Tax ID #	(Last Nam	e First if a Person)			
	·				
Turner, Janis M.		:			4.
1101 Shadow Lake Drive		•			
Birmingham, Al 35215					
· · · ·					
Social Security/Tax ID #		FIL	ED WITH:		
☐ Additional debtors on attached UCC-E			Judge of Prob	ate Shelby	County
3. NAME AND ADDRESS OF SECURED PARTY) (Last	Name First if a Persor	4	NAME AND ADDRESS OF ASSIG		(IF ANY) (Last Name First if a Person)
Social Security/Tax ID #					
	<u>.</u>	1998-48434			<u>.</u> . ———————————————————————————————————
5. This statement refers to original Financing Statement Filed with Judge of Probabilities				12-07	98
6. Continuation. The original financing statement be Secured Party no longer claims a secured Party's right under the property described in item 11 or to Assignment. Whose name and address appears Financing statement bearing lile not Secured Party releases the collater number shown above.	security interest under the financing statement to all of the property listed in item 4 above is	the financing statement bearing file number showed on this file, is assigned amended as set forth to it	earing the file number shown in above to the to the assignee tem 11		
Termination of file # 19	998–48434				11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
					
					
				^	
Check X if covered: Products of Collateral are also	o covered.		_	n U	
CHOCK A II COTOLOG. EL 1 TOGGOLS OF CONDUCTAD SI C AISC		<u></u>		// /X	
Signature(s) of Debtor(s)			First Comper By Gradus By	Bank Bank	· · · · · · · · · · · · · · · · · · ·
Signature(s) of Debtor(s) (necessary only if item 9 i	s applicable)			Brock, Asst.	Vice President
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY - ALPHABETICAL (4) FILING OFFICER C	OFFICER COPY - ACKNO	WLEDGEMENT	Type Name of Individ		FORM COMMERCIAL CODE — FORM UCC-3

(2) FILING OFFICER COPY - NUMERICAL