

1. Return copy or recorded original to

LOAN NUMBER: 8739154235
MAGNOLIA FEDERAL BANK FOR SAVINGS
P O BOX 1858
HATTIESBURG, MS 39403-1858

Pre-paid Acct. # _____

2. Name and Address of Debtor (Last Name First if a Person)

BAINBRIDGE, Charles
Lott 33 Peavine M H Pk.
Alabaster, AL 35007

Social Security/Tax ID # _____

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)

BAINBRIDGE, Ann
Lot 33 Peavine M H Pk.
Alabaster, AL 35007

Social Security/Tax ID # _____

☐ Additional debtors on attached UCC-E

3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)

MAGNOLIA FEDERAL BANK FOR SAVINGS
P O BOX 1858
HATTIESBURG, MS 39403-1858

Social Security/Tax ID # _____

☐ Additional secured parties on attached UCC-E

5. ☐ This statement refers to original Financing Statement bearing File No. #015777

Filed with SHELBY COUNTY

XXXX Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.

7. ☐ Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.

8. ☐ Partial or ☐ Full. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4.

9. ☐ Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.

10. ☐ Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11. _____

Check X if covered: ☐ Products of Collateral are also covered.

Signature(s) of Debtor(s) _____

Signature(s) of Debtor(s) (necessary only if item 9 is applicable) _____

Type Name of Individual or Business _____

THIS SPACE FOR USE OF FILING OFFICER
Date, Time, Number & Filing Office

029690

STATE OF ALA. SHELBY CO.
I CERTIFY THIS INSTRUMENT WAS FILED
91 OCT 21 11 34 AM
JUDGE OF PROBATE

FILED WITH:

SHELBY COUNTY

4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

Date Filed NOVEMBER 23 1986

11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____