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 fiting pursuant to the Uniform Commercial Comme	o a Filing Officer for
Return copy or recorded original to	Oneets Freebined.	THIS SPACE FOR USE OF FILING OFFICER	
Ieader Federal Bank for Savings P.O. Box 275 Memphis, Tennessee 38101-0275		Date, Time, Number & Filing Office	
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			•
Pre-paid Acct. #_3=28653=13. 2. Name and Address of Debtor	(Last Name First if a Person)	- 	_
Pickett, Bernice G. 1611 Egg & Butter Ro Columbiana, AL 3505 Social Security/TaxID 2A Name and Address of Debtor (IF ANY) Social Security/TaxID #	ad	FILED WITH:	04.25/1992-5986 04:05 PM CERTIFIE SHEDY COUNTY JUNE OF PRIBATE OUT NO. 10.00
3. NAME AND ADDRESS OF SECURED PARTY) (Las	t Name Circliff a Damon)	Shelby Co. Probate 4 ASSIGNEE OF SECURED PARTY (IF AF	NY) (Last Name First if a Person)
P.O. Box 275 Memphis, Tennessee 38 Social Security/Tax ID #	······································		
Filed with Shelby Co. Pro	bate	Date Filed July 21	1 <u>9</u> 87
6. Continuation. The original financing statement by 7. Termination. Secured Party no longer claims a 8. Partial or The Secured Party's right under the Pull property described in item 11 or to Assignment. Whose name and address appears 9. Amendment Financing statement bearing file not be a secured Party's right under the property described in item 11 or to the pr	etween the foregoing Debtor and Secured F security interest under the financing statement he financing statement bearing file number s he all of the property listed on this file, is assign	Party, bearing file number shown above, is still effective. ent bearing the file number shown above. shown above to the gned to the assignee. In item 11.	13.00
			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
	·.	•	6_0_2
	·- ·		
•	•		;
Check X if covered: Products of Collateral are als	so covered.	Beth Daver	port
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies) Leader Federal Bank for Savings	
Type Name of Individual or Business		Type Name of Individual or Business	UNIFORM COMMERCIAL CODE - FORM MCC-3