## 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	No. of Additional	This FINANCING STATEMENT is presented to a f	
as defined in ALA CODE 7-9-105(n).	Sheets Presented:	filing pursuant to the Uniform Commercial Code.	<del>-</del>
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Union STate Bank			
P. O. Box 647			<b></b>
Pell City, Al. 35125			س <del>لقا</del> ب
			in H &
			n n z s
Pre-paid Acct. #		1	
2. Name and Address of Debtor	(Last Name First if a Person)		
Abbott, Carrie			
P. O. Box 246			せ 光素量
Harpersville, Al.			* 0, 5 5
			20 三器
Social Security/Tax ID #			7 00
2A. Name and Address of Debtor (IF AN)	Y) (Last Name First if a Person)		
Social Security (Tay ID #			
Social Security/Tax ID #			
Additional debtors on attached UCC-E		A ACRICNIES OF CECURED DARTY (IS ANY)	() set Nama First if a Barean)
<ol><li>SECURED PARTY (Last Name First if a Person)</li></ol>		4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
Union State Bank			
15 N. 20th St.			
Pell City, Al. 35125			
Consider Converted Toward P. #			
Social Security/Tax ID #		-	
Additional secured parties on attached UCC-E			
5. This statement refers to original Financing State	tement bearing File No028231		
Filed withJOP_She1by_Co1	unty	Date Filed May 16	_ 19 <u>91</u>
		Party, bearing file number shown above, is still effective.	
· · · · · · · · · · · · · · · · · · ·	a security interest under the financing statement the financing statement bearing file number s		
	r to all of the property listed on this file, is assig	ned to the assignee	
9. Amendment Financing statement bearing file	number shown above is amended as set forth		
<ol> <li>Partial Secured Party releases the collag</li> <li>Release number shown above.</li> </ol>	ateral described in item 11 from the financing s	statement bearing file	
11.		<u>,</u>	,, <u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	•		11A. Enter Code(s) From
			Back of Form That Best Describes The
			Collateral Covered By This Filing:
			<del></del>
Albert Villager and The Act of the Control of			
Check X if covered: Products of Collateral are	also covered.		
Signature(s) of Debtor(s)		Signature aver Secure Partyles)	- Vナ
Signature(s) of Debtor(s) (necessary only if item	9 is applicable)	Signature(s) of Secured Partyles)	<u> </u>
	· · · · · · · · · · · · · · · · · · ·	Union State Bank	<del></del>
Type Name of Individual or Business (1) FIUNG OFFICER COPY — ALPHABETICAL (3) FIUI	NG OFFICER COPY — ACKNOWLEDGEMENT	Type Name of Individual or Business	ORM COMMERCIAL CODE — FORM UCC-