STATE OF ALABAMA — UNIFORM COMMERCIAL CODE 3 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 as defined in ALA CODE 7-9-105(n). No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.
1. Return copy or recorded original to Security Pacific Housing	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
Services, Inc.	
P.O. Box 385000	
Birmingham, Al 35238-5000	
Pre-paid Acct. #	
Name and Address of Debtor (Last Name First if a Person)	
Dunaway, Paul D.	
Rt. 1 Hwy. 55	
Westover, Al	
Sholby County	d L
Shelby County	2 1 5
Social Security/Tax ID #	E E E
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)	
Dunaway, Cynthia	i i i i i i i i i i i i i i i i i i i
Rt. 1 Hwy. 55	v 3. ⊒
Westover, Al	
Social Security/Tax ID #	FILED WITH:
Additional debtors on attached UCC-E NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person) Jefferson Federal Savings and	The state of the s
Loan Association	
215 North 21st Street	
Birmingham, Al 35203	
Social Security/Tax ID #	
☐ Additional secured parties on attached UCC-E	
5. This statement refers to original Financing Statement bearing File No. 017471	
Filed with Shelby county	Date Filed June 24, 19.87
6. Continuation. 7. Termination. 8. Partial or The Secured Party's right under the financing statement bearing file number such assignment. 9. Assignment Financing statement bearing file number shown above is amended as set forth secured Party releases the collateral described in item 11 from the financing statement.	ent bearing the file number shown above. hown above to the ned to the assignee. in item 11.
11 .	
This financing statement	11A. Enter Code(s) From Back of Form That Will remain effective Best Describes The
This financing statement until a termination stat	Conateral Covered
	1_0_3
Maturity Date: 07/01/200	2 Account # 6_0_2
	05320003045 ———
	——————————————————————————————————————
Check X if covered: Products of Collateral are also covered.	
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 Farty(ies)
	Jefferson Federal Savings & Loan
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY-ACKNOWLEDGEMENT	Type Name of Individual or Business STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3