## 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  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.
as defined in ALA CODE 7-9-105(n).  Sheets Presented:  1. Return copy or recorded original to	THIS SPACE FOR USE OF FILING OFFICER
ASSOCIATES FKA CHRYSLER FIRST PO BOX 708 JASPER AL 35501	Date, Time, Number & Filing Office
	ä ä ä
Pre-paid Acct. #	
JAMES R. JACKSON 5226 ROY DT HELENA AL 35080	# 1992 TERM 1992
Social Security/Tax ID #	<u>0</u>
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person CONNIE J JACKSON 5226 ROY DR HELENA AL 35080	
Social Security/Tax ID #	
☐ Additional debtors on attached UCC-E	
3. SECURED PARTY (Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
906 HWY 78 EAST JASPER AL 35501  Social Security/Tax ID #	
Additional secured parties on attached UCC-E	
5. This statement reters to original Figure Statement bearing File No. SHELBY COURT HOUSE  Filed with	Date Filed 5-24- 1990
<ul> <li>6. Continuation.</li> <li>7. Termination.</li> <li>8. Partial or Full property described in item 11 or to all of the property listed on this file, is as whose name and address appears in item 4.</li> <li>9. Amendment Financing statement bearing file number shown above is amended as set for the property described in item 11 or to all of the property listed on this file, is as whose name and address appears in item 4.</li> <li>9. Partial Secured Party releases the collateral described in item 11 from the financing number shown above.</li> </ul>	tement bearing the file number shown above.  per shown above to the assignee  forth in item 11.
1988 SKAMP TT VIN # 1S5R1610810124109	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
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<b>†</b>	
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Check X if covered: Products of Collateral are also covered.	<u> </u>
Signature(s) of Debtor(s)	Signature(s) of Secured Party(ies)
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	ASSOCIATES FKA CHRYSLER FIRST
Type Name of Individual or Business	Type Name of Individual or Business
PULL-A-PART BUSINESS FORMS PHONE 1-800-441-1020	001-00061 STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-: Approved by The Secretary of State of Alabama