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.	· · · · · · · · · · · · · · · · · · ·
1. Return copy or recorded original to SMALL BUSINESS ADMINISTRATION		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
2121 8th Avenue North, Suite 200			
Birmingham, AL 35203-2398			
			A ·
Pre-paid Acct. #			
2. Name and Address of Debtor	(Last Name First if a Person)	m m	L E B
REESE, RICHARD D.			
P. O. Box 1313 Alabaster, AL 35	007		
· · · · · · · · · · · · · · · · · · ·		T A	(may
			(を)
Social Security/Tax ID # Loan No. L 900146	10 08 BIR		1 2 2 3 3 4 2 2 6
A. Name and Address of Debtor (IF Af			SELECT SELECT O
		,	•
Contat Conveits (Toy ID #			
Social Security/Tax ID #			
Additional debtors on attached UCC-E SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last	Name First if a Person)
2121 8th Avenue N Birmingham, AL 35 Social Security/Tax ID #	-		
Additional secured parties on attached UCC-E			
·		0. 06527. 50252	
5. This statement refers to original Financing S Filed with	County, AL.	B; 06537; 50352 Date Filed 6/7/88; 6/1/88; 7/	6/78
		d Party, bearing file number shown above, is still effective.	0, , 0
8. Partial or The Secured Party's right und property described in item 11 Assignment. whose name and address app 9. Amendment Financing statement bearing for the Secured Party releases the control Release number shown above.	ns a security interest under the financing state der the financing statement bearing file numbe or to all of the property listed on this file, is ass pears in Item 4. file number shown above is amended as set for plateral described in item 11 from the financing	er shown above to the signed to the assignee orth in item 11.	
t 1 .		44 \$ 7-1-	or Code(a) Ere-
		Baci	er Code(s) From k of Form That t Describes The
		Colli	ateral Covered his Filing:
•		•	
	•		
Object William Company of the Compan	alaa		
Check X if covered: Products of Collateral ar	e also covered.	SMAIAL BUSINESS ADMINISTRATI	ON A
Signature(s) of Debtor(s)		Stagesty of September Services .	tel
		Harold G. Mayfield, Chafe	
Signature(s) of Debtor(s) (necessary only if ite	ım 9 iş applicable)	Signature(s) of Secured Party(ies) Portfolio Management Divisi	on 47FR230
Type Name of Individual or Business		Type Name of Individual or Business	· · · · · · · · · · · · · · · · · · ·