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.

	هنتشنشنشنشنشنت ن		
☐ The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is presented to a filing pursuant to the Uniform Commercial Code	Filing Officer for
as defined in ALA CODE 7-9-105(n).	Sheets Presented:	filing pursuant to the Uniform Commercial Code THIS SPACE FOR USE OF FILING OFFICER	
Return copy or recorded original to		Date, Time, Number & Filing Office	
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			1 0 2 €
			S O II II
Pre-paid Acct. #	(Last Name First if a Person)	-	S S S S S S S S S S S S S S S S S S S
Name and Address of Debtor	(Last Ivalile First II a Ferson)		
HULON DAVID AND			* Z = E
PATRICIA LYNN CLOWERS			
1426 TROPICAL LANE			
ALABASTER, AL 35007			E Ga B
•			44
Cooled Coovering / Toy ID #			*
Social Security/Tax ID #	(Last Name First if a Person)	•	
	(======================================		
Carlal Cassella (Tass ID #		'	
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)
ATABAMA DOMED COMDAN	īV		
ALABAMA POWER COMPAN	N I		
600 NORTH 18th STREET	00001 110E		
BIRMINGHAM, ALABAMA 3	32731-1122		
Social Security/Tax ID #			
		1	
Additional secured parties on attached UCC-E			
5. This statement refers to original Financing Statem	ent bearing File No		
Filed with <u>Judge of Probat</u>	e	Date Filed July 13	1942
6. Continuation. The original financing statement be			
7. XX ermination. Secured Party no longer claims a secured Party n			
	e financing statement bearing file number s all of the property listed on this file, is assig		
Assignment. whose name and address appears	in item 4.		
	mber shown above is amended as set forth al described in item 11 from the financing s		
Release number shown above.			
11.			
			11A. Enter Code(s) From
			Back of Form That Best Describes The
			Collateral Covered By This Filing:
	•		
	•		
Check X if covered: Products of Collateral are also	covered.		a,
		()	L
			<u>~⊤~</u>
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item 9 is	s applicable)	Signature(s) of Secured Party(ies)	
		ALABAMA POWER COMPA	NY
Type Name of Individual or Business		Type Name of Individual or Business	
(1) FILING OFFICER COPY — ALPHABETICAL (3) FILING (OFFICER COPY — ACKNOWLEDGEMENT	STILIDIDG CARLE 1220	FORM COMMERCIAL CODE FORM UCC-3