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 Filing Officer for filing pursuant to the Uniform Commercial Code.		
as defined in ALA CODE 7-9-105(n). 1. Return copy or recorded original to	Sheets Presented:	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		······································
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Alagasco				
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Pre-paid Acct. #			70	
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Binn, al	35 12-4		#	10 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Social Security/Tex ID #			٠	
2A. Name and Address of Debtor (IF	ANY) (Last Name First if a Pers	son)	is C	
			144	0 8
Social Security/Tex ID #				
Additional debtors on attached UCC-E			AP ANY	(Last Name First if a Person)
3. SECURED PARTY (Last Name First if a Person	on)	4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Cast Mature Lust in a Leason)
Alagasco/SHANDAND		A 1		
		Alagasco		
Social Security/Tex ID #				
Additional secured parties on attached UCC-	·E	003 11111		
5. This statement refers to original Financin	g Statement bearing File No.	1995-17-1	}	र र
Filed with	ement between the foregoing Debtor and Se	cured Party, bearing file number shown above, is still e	ffective.	
7 Termination. Secured Party no longer c	claims a security interest under the financing under the financing statement bearing file nu	statement bearing the file number shown above.		
☐ Full property described in item	11 or to all of the property listed on this file,	is assigned to the assignee		
Assignment, whose name and address 9. Amendment Financing statement bears	ing file number shown above is amended as a se collateral described in item 11 from the fina	set forth in item 11.		
10. Partial Secured Party releases the Release number shown above.	e Constetal described in item 11 month the inte			
.11.			1	1A. Enter Code(s) From
				Back of Form That Best Describes The
				Collateral Covered By This Filling:
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				. ——— ————
Check X if covered: Products of Collater	al 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)	Signature(s) of Secured Party(les)	· <u>-</u>	
Type Name of Individual or Business		Type Name of individual or Busine	368	
		STANDARD	FORM — UNIFORM C	COMMERCIAL CODE — FORM UCC-