## 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.	
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
NationsCredit	Commercial Corp	Date, Inte, Number & Filing Circo	
P 0 Box 468029		GT.	<b>₽</b>
Atlanta, GA 30346		in the second se	M H W
			4488
			4 2 2
Pre-paid Acct. #	<del>_</del>		
2. Name and Address of Debtor	(Last Name First if a Person)		
Godfrey, Rober	t		てる言
Rt 3 Box 53			* 0 5 5
Calera, AL 350	40		大
			H 0
Social Security/Tax ID #			
2A. Name and Address of Debtor (IF A	ANY) (Last Name First if a Person)		
	•	·	
*			
Social Security/Tax ID #	······································	<u> </u>	
Additional debtors on attached UCC-E			
3. SECURED PARTY (Last Name First if a Person)	···········	4. ASSIGNEE OF SECURED PARTY (IF AN	(Last Name First if a Person)
CFFS			
P O Drawer 898	808		
Homewood, AL			
	1		
Social Security/Tax ID #	<u> </u>		
Additional secured parties on attached UCC-E		000004	
5. This statement refers to original Financing 5		022804	89
Filed with Shelby County		Date Filed_April 27	19
<u></u>	ent between the foregoing Debtor and Secured P ms a security interest under the financing stateme	enty, bearing file number shown above, is still effective.	
8. Partial or The Secured Party's right und	der the financing statement bearing file number s	hown above to the	
☐ Full property described in item 11 Assignment whose name and address ap	or to all of the property listed on this file, is assignerars in item 4.	ned to the assignee	
9.   Amendment Financing statement bearing	file number shown above is amended as set forth ollateral described in item 11 from the financing s		
Release number shown above.	onateral described in item 11 from the intancing s	Referrent bearing me	<u></u> -
11.	-		
Termina	tion: 7/6/93		11A. Enter Code(s) From Back of Form That
1611112130	(01011. 770755		Best Describes The Collateral Covered
9898542			By This Fillng:
2030342			
-	•		
			<del></del>
		-	
Check X if covered: Products of Collateral a	re also covered.		
	•		•
Signature(s) of Debtor(s)	<del></del>	Signature(s) of Secured Party(ies)	noen.
Signature(s) of Debtor(s) (necessary only if its	em 9 is applicable)	Signature(s) of Secured Party(ies)	y in you
a.S. mariatal as manustal trianggodili anili ir ir		CFFS CFFS	<i>-</i>
Type Name of Individual or Business		Type Name of Individual or Business	

(I) FILING OFFICER COPY-ALPHARETICAL