## 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.

REORDER FROM
Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is p filing pursuant to the Uniform Com	resented to a Filing C mercial Gode.	Officer for
<ol> <li>Return copy or recorded original to New South Federal Savings</li> </ol>	Bank	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	3	
P. O. BOX 101508				e .
Birmingham, AL 35210			07	台出量
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			Ö	on to be
			ģ	の田島
Pre-paid Acct. #  2. Name and Address of Debtor	(Last Name First if a Person)		Q.	0 -> 3 0 -> 3
Hamblen, Donald Kent			~~	てを言
701 Foxhill Drive			*	
Bessemer, AL 35023			44	
			Ç.	7 0
			1-4	e e e e e e e e e e e e e e e e e e e
Social Security/Tax ID #	// ant Marca First if a Paragra			
Part Name and Address of Debtor (IF ANY) Hamblen, Anna G.	(Last Name First if a Person)			•
701 Foxhill Drive				
Bessemer, AL 35023				
•				
Social Security/Tax ID #		FILED WITH:		
Additional debtors on attached UCC-E				
3. NAME AND ADDRESS OF SECURED PARTY) (Last N	lame First if a Person)	4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person)
New South Federal Savings	Bank			
P.O. BOX 101508 Birmingham, AL 35210				
DITHITHSHAM, AD 33210				
Social Security/Tax ID #				
Additional secured parties on attached UCC-E			<del></del> .	
5. This statement refers to original Financing Statement	nt bearing File No. 1992-26234	11 0 0	2	
	te Shelby County	Date Filed 11-9-92		
	curity interest under the financing stateme	nt bearing the file number shown above.	GIICCHYC.	
	financing statement bearing file number s It of the property listed on this file, is assig			
Assignment, whose name and address appears in				
10.   Description:  Partial Secured Party releases the collatera	I described in item 11 from the financing s			
Release number shown above.  11.	······································	<u></u>		
				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.		,	
Chicarita Detailed La Frederic de Communica de Caldo	<u></u>		<u>—</u>	
Signature(s) of Debtor(s)	·	Signature s of secured Party(ies	10	
		Signature(s) of Secured Party(ies)	Tower	· <del></del>
Signature(s) of Debtor(s) (necessary only if item 9 is	applicable)	New South Federa	al Savings	Bank
Type Name of Individual or Business		Type Name of Individual or Busin	ess	

(1) FILING OFFICER COPY - ALPHASETICAL

(2) FILING OFFICER COPY - NUMERICAL