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 Fi filing pursuant to the Uniform Commercial Code.	ling Officer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	•
National Filing Service. Inc. 2 Corporate Place Suite 100 1501-42nd Street			
West Des Moines la 50266-1005			
Pre-paid Acct. #		·	C C C C C C C C C C C C C C C C C C C
BURCHFIELD, ARLENE B			C 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
2700 COUNTY RD 51 WILSONVILLE AL 35186		27.73 27.73 26.75	
Social Security/Tax ID #			11/1
BURCHFIELD, LARRY K 2700 COUNTY RX 51 WILSONVILLE AL 3518	86		
Social Security/Tax ID #		FILED WITH:	
☐ Additional debtors on attached UCC-E			
3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
JOHN DEERECO PO BOX 65090 WEST DES MOINES IA Social Security/Tax ID #	50265		
Additional secured parties on attached UCC-E		022704	
5. This statement refers to original Financing Statement bearing File No		Date Filed 4-17-89 19	
7. Termination. Secured Party no longer claim 8. Partial or The Secured Party's right under property described in Item 1. Assignment. Whose name and address are property described in Item 1. Assignment. Whose name and address are property described in Item 1. Assignment. Whose name and address are property described in Item 1. Partial Secured Party releases the continuous property described in Item 1. Partial Secured Party releases the continuous property described in Item 1.	ms a security interest under the financing statem ider the financing statement bearing file number : 1 or to all of the property listed on this file, is assi	shown above to the gned to the assignee the in item 11.	
10-001-002-04646 © 45	32-00		11A. Enter Code(s) From Back of Form That Best Describes The
C1794			Collateral Covered By This Filing:
_ :·			
Check X if covered: Products of Collateral a	are also covered.	Den Die	<u></u>
Signature(s) of Debtor(s)		Signature(s) of Secured Party(les)	renon Clal
Signature(s) of Debtor(s) (necessary only if it		Signature(s) of Secured Party(les)	
Type Name of Individual or Business	•	Type Name of Individual or Business	ORM COMMERCIAL CODE — FORM UCC-3