	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
Pre-paid Acct. #	New Address: P.O. Box 437 West Blockon, Al. 351256
Social Security/Tax ID #	FILED WITH:
NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person) OFF HAYRE MOTTERS COMPANY	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
P.O.Box 731 Antioch .Tn 37013 Social Security/Tax ID # Additional secured parties on attached UCC-E	
This statement refers to original Financing Statement bearing File No	59002 April 25 85
Continuation. The original financing statement between the foregoing Debtor and Secured 7. Termination. Secured Party no longer claims a security interest under the financing state 7. The Secured Party's right under the financing statement bearing file number 7. Full 7. Assignment. Assignment. Amendment 8. Amendment 8. Amendment 9. Partial 8. Carred Party releases the collateral described in item 11 from the financing 8. The Secured Party releases the collateral described in item 11 from the financing 8. The Secured Party releases the collateral described in item 11 from the financing 8. The Secured Party releases the collateral described in item 11 from the financing 9. The Secured Party releases the collateral described in item 11 from the financing 9. The Secured Party releases 11.	ement bearing the file number shown above. er shown above to the ssigned to the assignee orth in item 11. eg statement bearing file 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.	· · · · · · · · · · · · · · · · · · ·
Check X if covered: Products of Collateral are also covered. Signature(s) of Debtor(s)	Signature(s) of Secured Party(ies)
Signature(s) of Debtor(s)	

filing pursuant to the Uniform Commercial Code.

as defined in ALA CODE 7-9-105(n).

Sheets Presented: