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.

10.00

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is pre-	esented to a Filing percial Code.	Officer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	· · · ·	-
FIRST ALABAMA BANK LOAN OPERATION/QUALITY P.O. BOX 10247 BIRMINGHAM, AL 35202	CONTROL DEPT.		•	···
Pre-paid Acct. #				~
2. Name and Address of Debtor	(Last Name First if a Person)		დ	2 4 4
MOOON TIAL MED THOMAS I	· D		66	
MCCOY, WALTER THOMAS J 282 BRENDA DRIVE	K.		₩.	
MONTEVALLO, AL 35115			1994-	29.4-000000000000000000000000000000000000
Social Security/Tax (D #				でを言葉
2A. Name and Address of Debtor (IF AN)	(Last Name First if a Person)		Inst	05/11 12:26 SEEN (
Social Security/Tax ID #				
☐ Additional debtors on attached UCC-E				₹
3. SECURED PARTY (Last Name Eirst if a Person) SECOR BANK, BY: FIRST ALABA! ITS SERVICING P.O. BOX 102 BIRMINGHAM, Social Security/Tax ID #	MA BANK G AGENT 10247	4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person)
☐ Additional secured parties on attached UCC-E				
5. This statement refers to original Financing State	ement bearing File No025078			
	BATE - SHELBY COUNTY	Date Filed APRIL		4 0
Full property described in item 11 or Assignment, whose name and address appea 9. Amendment Financing statement bearing file	a security interest under the financing statement the financing statement bearing file number sho to all of the property listed on this file, is assign	it bearing the file number shown above. own above to the ed to the assignee in item 11.	ective.	
TERMINATED AS OF MARCI	H 30. 1994			
			•	I1A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
				
				
Check X if covered: X Products of Collate	eral are also covered.			
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies).	2- Com	uk
Signature(s) of Debtor(s) (necessary only if item 9	is applicable)	Signature(s) of Secured Party(ies)		
Type Name of Individual or Business		SECOR BANK, FSB I Type Name of Individual or Business	 ;;	ST ALABAMA BANK SERVICING AGENT
	G OFFICER COPY — ACKNOWLEDGEMENT COPY — SECOND PARTY(S) (5		AM — UNIFORM CO	OMMERCIAL CODE — FORM UCC-3 etary of State of Alabama