## 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 355361
(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 participation of the Uniform Committee of t	presented to a Filing Officer for imercial Code.	or
Return copy or recorded original to	<del></del>	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	R	
MAGNOLIA FEDERAL P.O BOX 1858 HATTIESBURG, MS.		1	-23044	ETIFIED OF PROBATE OF PROBATE
Pre-paid Acct. #	•		*	お出
Name and Address of Debtor	(Last Name First if a Person)	-	<u>6</u>	<b>O</b>
MARCH, DONNIE			- <del></del>	でも
RT. 1, BOX 350			<b>₩</b>	ಸ್ಟ್ರೆ ಜ್ಞಾತ್ರೆ
LOT 129	•		Ψ.	どに当
PELHAM, AL. 3512	<b>4</b>		Ä	030
Social Security/Tax ID #				
2A. Name and Address of Debtor (iF ANY)	(Last Name First if a Person)			
MARCH, SANDRA SAME			•	
Social Security/Tax ID #		FILED WITH:		<u> </u>
☐ Additional debtors on attached UCC-E				
3. NAME AND ADDRESS OF SECURED PARTY) (Las	t Name First if a Person)	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last	Name First if a Person)
MAGNOLIA FEDERAL	BANK FOR SAVINGS			
P.O. BOX 1858				
HATTIESBURG, MS.	39403-1858			
Social Security/Tax ID #				
☐ Additional secured parties on attached UCC-E				•
5. This statement refers to original Financing Stater	nent bearing File No.	TNST#1004_04344		
<u> </u>	UDGE OF PROBATE	Date Filed 2-8	<sub>19</sub> 94	•
8. Partial or The Secured Party's right under the property described in item 11 or to Assignment, whose name and address appears 9. Amendment Financing statement bearing file n	security interest under the financing stateme re-financing statement bearing file number st rall of the property listed on this file, is assign	nt bearing the file number shown above.  hown above to the  ned to the assignee  in item 11.	effective.	
LOAN NO. # 87 691585 P.O. 6-23-1994			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:	
•				
•				
				<del></del>
			<del></del>	
Check X if covered: ☐ Products of Colleteral are als	o covered	_	_	<del></del>
Check X if covered: Products of Collateral are als	o covered.			7
Check X if covered: Products of Collateral are als  Signature(s) of Debtor(s)	o covered.	Santy (see June Party (see		
Signature(s) of Debtor(s)		A ULAA CU		
		Signature(s) of Secured Party(les)  Type Name of Individual or Busines		