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 filling pursuant to the Uniform Commercial Co	
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
First national bank of p o box 977 colunbiana, al 35051	columbiana		29318 29318 717 160 F PROBATE
Pre-paid Acct. #			1 00
2. Name and Address of Debtor	(Last Name First if a Person	1)	40000000000000000000000000000000000000
Foster, Phillip 100 looney road Colubmaina, Al 35051			1nst # 19 09/27/19 01:34 PM SHEBY COUNTY
Social Security/Tax ID #	NY) (Las Name First if a Person	1)	
Howard, Johnny 100 Looney Road Columbiana, Al 35051			
Social Security/Tax ID #			
Additional debtors on attached UCC-E			
3. SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF A	NY) (Last Name First if a Person)
First National Bank of p o box 977 Columbiana, Al 35051	colunmbiana		
Social Security/Tax ID #			
Additional secured parties on attached UCC-E			
5. XX his statement refers to original Financing State	ement bearing File No. <u>024674</u>		19
 7. XXTermination. Secured Party no longer claims 8. Partial or The Secured Party's right under property described in item 11 or Assignment. whose name and address appears 9. Amendment Financing statement bearing file 	s a security interest under the financing state or the financing statement bearing file numb or to all of the property listed on this file, is a	ssigned to the assignee	
1989 Fleetw	rood Mobile home		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	a elea covered		
Check All covered: Li Products of Collateral are	- AISO COVERED.	MMMILINAN	H114
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	my)
Signature(s) of Debtor(s) (necessary only if item	n 9 is applicable)	Signature(s) of Secured Party(ies)	
Type Name of Individual or Business		Type Name of Individual or Business	· · · · · · · · · · · · · · · · · · ·
(1) FILING OFFICER COPY — ALPHABETICAL (3) FIL	ING OFFICER COPY — ACKNOWLEDGEMENT E COPY — SECOND PARTY(S)	STANDARD FORM — (5) FILE COPY DEBTOR(S) Approved	UNIFORM COMMERCIAL CODE — FORM UCC-3 by The Secretary of State of Alabama