## 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 filling pursuant to the Uniform Con	presented to a Filing Officer for nmercial Code.
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Alagasco			
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Pre-paid Acct. # Name and Address of Debtor	(Lest Name First If a Person)		2
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Griffis, Kenneth			
2101 Cross Rdg Ln Bham, AL 35244			
Bliam, AL 33244			
•			が
Social Security/Tex ID #			
Name and Address of Debtor (#F ANY	(Last Name First If a Person)		
			<b>James</b> (sept.)
			e espirit
Social Security/Tax ID #			<b>-</b>
Additional debtors on attached UCC-E			
SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First If a Person)
Standard Htg & Air		Alagasco	
Social Beautiful Tou IS A			
Social Security/Tax ID #	<del></del>	-	
Additional secured parties on attached UCC-E	······································	32151	· ········
. XXThis statement refers to original Financing State She	ement bearing File No.	0ct	94
Pagg with		Date Filed	, 19
Continuation. The original financing statement EXTermination. Secured Party no longer claims a	t between the foregoing Debtor and Secured P a security interest under the financing stateme	arty, bearing file number shown above, is still ent bearing the file number shown above.	effective.
. Partial or The Secured Party's right under	the financing statement bearing file number si to all of the property listed on this file, is assig	hown above to the	
Assignment, whose name and address appear	sra in Hem 4.		
	number shown above is amended as set forth iteral described in item 11 from the financing s		
Release number shown above.			
			11A. Enter Code(s) From
			Back of Form That Best Describes The
			Colleteral Covered By This Filing:
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			<del>*</del> * *
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Check X if covered: Products of Colleteral are a	also covered.		
Check X if covered: Products of Colleteral are a	also covered.		
Check X if covered: Products of Colleteral are a Signature(s) of Debtor(s)	also covered.	Signaturate) of Secured Party(lee)	
	- -	Signature(s) of Secured Party(les)	
Signature(s) of Debtor(s)	- -	Ch Juga	