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.

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☐ The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEME	ENT is presented to a Filing	Officer for
as defined in ALA CODE 7-9-105(n). 1. Return copy or recorded original to	Sheets Presented:	##ing pursuant to the Unifor		
First national Bank of columbiana P o Box 977 Columbiana, Al 35051		Date, Time, Number & Filing Office		
Pre-paid Acct #				
2. Name and Address of Debtor	(Last Name First if a Person)			4
Oliver, Marty Rt 2 Box 340				0502 5026 1F1E
Columbiana, Al 35051				995-0 95-0 688 6
Social Security/Tax ID #	NY) (Last Name First if a Person)			+ x ≥ £
	ett)			Inst # O2/27/1 11=52 AM SHEBY COUNTY OUT SHE
Social Security/Tax ID #				
Additional debtors on attached UCC-E SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PART	Y (IF ANY)	(Last Name First if a Person)
First National Bank of Column P o Box 977 Column Al 35051 Social Security/Tax ID #			• •••••••••••••••••••••••••••••••••••	
☐ Additional secured parties on attached UCC-E				
5. ŽŽThis statement refers to original Financing S	Statement bearing File No. 1994-29320		<u>.</u>	
Filed with County	<u> </u>	Date Filed 9-27	-1994 ₁₈	<u> </u>
8. Partial or The Secured Party's right und property described in item 11 whose name and address appropriate Partial Secured Party releases the concept Release number shown above.	ns a security interest under the financing stateme der the financing statement bearing file number sl or to all of the property listed on this file, is assign	ent bearing the file number shown above to the need to the assignee in item 11.	ve .	
1969 Dodge 4x4 pu				11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
		•		
Check X if covered: Products of Collateral ar	re also covered.	MANTL	1 hinH	
Signature(s) of Debtor(s)	······································	Signature(s) of Secured Pr	arty(ies)	y)
Signature(s) of Debtor(s) (necessary only if its	em 9 ls applicable)	Signature(s) of Secured Party(les) First National Bank of Columbiana		
Type Name of Individual or Business	HING OCCUPED COOK ACKNOWN COOKS	Type Name of Individual o		COMMERCIAL CODE — FORM UCC-3
,,	ILING OFFICER COPY — ACKNOWLEDGEMENT ILE COPY — SECOND PARTY(S)	(5) FILE COPY DEBTOR(S)		cretary of State of Alabama