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 present filling pursuant to the Uniform Commercial	ted to a Filing Officer for all Code.
Return copy or recorded original to	······································	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
FIRST FAMILY FINANCIAL SERVICES, INC. 3594 PELHAM PKWY STE 102 PELHAM, AL 35124			
Pre-paid Acct. #			5727 FF 1E PROPATE 90
Name and Address of Debtor THOMAS, SANDY D PO BOX 242 HARPERSVILLE, AL 35078	(Last Name First if a Person		# 1995-0 6/1995-0 PH CERT 0 KG CERT
Social Security/Tax ID #			
THOMAS, TOWY E PO BOX 242 HARPERSVILLE, AL 35078	(Last Name First if a Person		
Social Security/Tax ID #			
Additional debtors on attached UCC-E			F ANY) (Last Name First if a Person)
FIRST FAMILY FINANCILA SERV 3594 PELHAM PKWY STE 102 PELHAM, AL 35124 Social Security/Tax ID #	/ICES, INC.		
V	nent hearing File No. INST #1993	3–12176	
5. This statement refers to original Financing Statement bearing File No. 1NST 1/1993-14 Filed withSHELBY_CO		Date Filed 4/30/93	
 7. Termination. Secured Party no longer claims as 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 not a secured Party is right under the property described in item 11 or to a secured Party is right under the property described in item 11 or to a secured Party no longer claims as 	security interest under the financing state te financing statement bearing file numb all of the property listed on this file, is a	ssigned to the assignee forth in item 11.	11A Enter Code(s) From
1973 CRYSTAL STAR MOBILE H SERIAL #7354122212 12X54	DME	•	Back of Form That Best Describes The Collateral Covered By This Filting:
		•	
Check X if covered: Products of Collateral are als	so covered.	DANN NA FOR	ton 191
Signature(s) of Debtor(s) (necessary only if item 9	is applicable)	Signature(s) of Secured Party(les) Signature(s) of Secured Party(les) FIRST FAMILY FINANCIAL	SEDVICES INC
TOMOLE & CAMOV D THOMAS	•	FIK21 FAMILI LIMANCIAL	JERVETOLUS LITUS