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 p	resented to a Filing Officer for mercial Code.	
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICEI Date, Time, Number & Filing Office		
First National Bank P O Box 977	of Coltumbiana			
Columbiana, Al 35051			93 1ED	
			878 879 171 8684	∋
Pre-paid Acct. # 2. Name and Address of Debtor	(Last Name First if a Person)			
2. Haire and Address of Debtor	(Last Name First II a Ferson)		2000 1000 1000 1000 1000 1000 1000 1000	
Wheeler, Danny jo			6 ± ₹ ₹	
P o Box 423				- =
Columbiana, Al 35051			55. 14.70 第2.87 88.89	8
Social Security/Tax ID #			7 D G	
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)			
Social Security/Tax ID #		_		
Additional debtors on attached UCC-E 3. SECURED PARTY (Last Name First if a Person)	· · · · · · · · · · · · · · · · · · ·	A ACCIONEE OF SECURED DADDY	AF AND	
		4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a	Person)
First National Bank	of Columbiana			
P o Box 977 Columbiana, Al 35051		•		
Social Security/Tax ID # Additional secured parties on attached UCC-E	······································			
5. A This statement refers to original Financing States	ment bearing File No1992-19	9578		
Filed with County	<u> </u>	Date Filed 9-10-9	19	
Pull 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 states he financing statement bearing file number o all of the property listed on this file, is ass	ment bearing the file number shown above. I shown above to the signed to the assignee ofth in item 11.	effective.	
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1974 Concord Motor H	ome ,		11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:	9
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Chack X if covered: Products of Colleteral are als	o covered.	· -·· <u>-</u> - · · - · · - · · - · · · - · · · - ·		— — –
		Vacin 10 R	Intlus	
		Signature(s) of Secured Party(les)		
Signature(s) of Bioblor(s)			U ·	
Signature(s) of Debtor(s) (necessary only if item 9 in Type Name of Individual or Business	s applicable)	Signature(s) of Secured Party(les)	of Columbiana	

Approved by The Secretary of State of Alabama