Return copy or recorded original to	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
SECURITY PACIFIC HOUSING SERVICES,		
DIVISION OF BANK OF AMERICA, FSB		
P.O. BOX 385000		
BIRMINGHAM, AL 35238		
Pre-paid Acct. #		
Name and Address of Debtor (Last Name First if a Person)		
BELCHER, GEORGE D. BOX 68 CEDAR GROVE PARK MAYLENE, AL 35114		
Social Security / Tax ID #		+ <u>+ </u>
BLECHER, DORIE N.		
BOX 68 CEDAR GROVE PARK		4 14 20
MAYLENE, AL 35114	!	
		5
Conict Converts / Tay ID #	FILED WITH:	
Social Security/Tax ID #]	· Ba
Additional debtors on attached UCC-E	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ART)	
SECURITY PACIFIC HOUSING SERVICES, DIVISION OF BANK OF AMERICA, FSB P.O. BOX 385000 BIRMINGHAM, AL 35238 Social Security/Tax ID *		
☐ Additional secured parties on attached UCC-E		
5. This statement refers to original Financing Statement bearing File No027112		
Filed with SHELBY COUNTY	Date Filed 12-19-90	_, 19
 6. Continuation. The original financing statement between the foregoing Debtor and Secured Party. 7. Tankaox Secured Party no longer claims a security interest under the financing statement. 8. Partial or The Secured Party's right under the financing statement bearing file number statement. 9. Full property described in item 11 or to all of the property listed on this file, is assign whose name and address appears in item 4. 9. Amendment Secured Party releases the collateral described in item 11 from the financing statement bearing statement bearing tile number shown above is amended as set forth Secured Party releases the collateral described in item 11 from the financing statement shown above. 	ent bearing the file number shown above. hown above to the need to the assignee in item 11.	
		11A. Enter Code(s) From
ACCOUNT # 51027051		Back of Form That Best Describes The
ACCOUNT PAID IN FULL 05-22-95		Collateral Covered By This Filing:
ACCOUNT PAID IN FOLL 03-22-33		
	,	
		
•	**·	
,		
		
Check X if covered: Products of Collateral are also covered.	·	
Signature(s) of Debtor(s)	Signature(s) of Secured Party(ies)	15-31-95
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	SECURTIC HOU	SING SERVICES
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY-ACKNOWLEDGEMENT		ORM COMMERCIAL CODE — FORM UCC-3
(2) FILING OFFICER COPY - NUMERICAL (4) FILE COPY - SECURED		he Secretary of State of Alabama
	<u> ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	

filing pursuant to the Uniform Commercial Code.

as defined in ALA CODE 7-9-105(n).

Sheets Presented: