## 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.

| as defined in ALA CODE 7-9-105(n).   | No. of Additional Sheets Presented:  | This FINANCING STATEMENT is p<br>filing pursuant to the Uniform Con  | nmercial Code.   |
|--|--|--|--|
| Return copy or recorded original to  |  | THIS SPACE FOR USE OF FILING OFFICE Date, Time, Number & Filing Office   | A  |
| FIRST ALABAKA BANK   |  |  |  |
| LOAN OPERATIONS  |  |  |  |
| P O BOX 10247  |  |  |  |
| BIRMINGHAM AL 35202  |  |  | ·  |
|  |  |  | о е п<br>С   |
| Pre-paid Acct. #   |  |  |  |
| Name and Address of Debtor   | (Last Name First if a Person)  |  |  |
| OWENS, ROBERT E JR & L   | AUREN D  |  | 7 7 2  |
| 3492 BEARDEN LANE  |  |  |  |
| HELENA AL 35080  | •  |  |  |
|  |  |  | せん かんだ 医室  |
|  |  |  | * N 3 8 3  |
| Social Security/Tax ID #_  |  |  | 4 78 <b>3</b> 5  |
| . Name and Address of Debtor (IF AN)   | (Last Name First if a Person)  |  |  |
|  |  |  | H H  |
|  |  |  |  |
| •  |  |  |  |
|  | ••   |  |  |
|  |  |  |  |
| Social Security/Tax ID #   |  |  |  |
| 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  |
| FIRST ALABA  | MA BANK  |  |  |
|  | MERY HIGHWAY   |  | •  |
|  | 35216  |  |  |
| •  | JJ   |  |  |
|  | JJ210  |  |  |
| Social Security/Tax ID #   |  |  |  |
| Social Security/Tax ID #Additional secured parties on attached UCC-E   |  |  |  |
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