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(1) FILING OFFICER COPY — ALPHABETICAL (2) FILING OFFICER COPY — NUMERICAL

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STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT	, ETC.	FO	RM UC	:C-
TOPLAV/HOUD BUTTAINS		÷	1 × 2	

DISPLAY/USER DEFIN	-		Back Before: Filling	ut Forms 6/	20/96 STBK1:
CCOUNT NUMBER: 111	8105	SCREEN	TEXT NO: 4		÷
The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presente		This FINANCING STATEMENT is filing pursuant to the Uniform Co		r for
Return copy or recorded original to RANKINS, 185 JARON	RITA M	••••••••••••••••••••••••••••••••••••••	THIS SPACE FOR USE OF FILING OFFICE Date, Time, Number & Filing Office		
COLUMBIAN	A	AL 350	51		
ØØØ1.1.:	18105				
Name and Address of Debtor	•	e First if a Person)			· •• <u> </u>
NAME AND A	ADDRESS SAM	E AS ABO	VE.	36-2178	CERTIFY CERTIFY
Social Security/Tax ID #	<u>, </u>			<u>6</u>	ひょ 屋舗
	ANY) (Last Nam	e First if a Person)		~	
ADDRESS SAM	E AS ABOVE	••	QΚ	Inst	07.70 138.
Social Security/Tax ID #					
Additional debtors on attached UCC-E					
SECURED PARTY (Last Name First if a Person	1)	·	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (L	ast Name First if a Person)
STMS P O BOX 2465 B'ham Ala 35201 Social Security/Tax to #	<u> </u>				
	<u> </u>	19953	2489		
5. This statement refers to original Financing XXX Filed with JUDGE OF PROF			Date Filed 11-09	19_95	<u> </u>
☐ Full property described in item 1 Assignment whose name and address a 9. ☐ Amendment Financing statement bearing	tims a security interest under nder the financing statement I or to all of the property list opposes in item 4.	the financing stateme bearing file number si ed on this file, is assign amended as set forth	nt bearing the file number shown above. nown above to the ned to the assignee in item 11.	till effective	
					Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
9					
Check X if covered: Products of Colleteral	are also covered.	<u> </u>	Domini	Moon	
Signature(s) of Debtor(s)	•		Signature(s) of Secured Party(
Signature(s) of Debtor(s) (necessary only if	item 9 is applicable)		Signature(s) of Secured Party() Type Nation of Individual or Bu		
Type Name of Individual or Business		i	Type retine of thornoust of Bu		

(3) FILING OFFICER COPY — ACIONOWLEDGEMENT (4) FILE COPY — SECOND PARTY(S) (5) FILE COPY DEBTOR(S)