## 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.

REORDER FROM

514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
-(612) 421-1713

The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to filing pursuant to the Uniform Commercial Co.	a Filing Officer for de.
. Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
NationsCredit Commercial Cor	poration		
1000 Holcomb Woods Pkwy., Ste. 240			
Roswell, GA 30076			
Pre-paid Acct. #			
Name and Address of Debtor	(Last Name First if a Person)		
Hall Chaples O			
Wall, Charles O.			甲 盘出更 8
820 County Road 33			4 01-14
Calera, AL 35040		]	
			# 90 0 B
Social Security/Tax ID #			\ \C_{\bar{\bar{\bar{\bar{\bar{\bar{\bar
A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		
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			A STATE OF THE STA
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Social Security/Tax ID #		FILED WITH:	······································
		Shelby County Judge o	of Probate
Additional debtors on attached UCC-E			
NAME AND ADDRESS OF SECURED PARTY) (Last Na	me First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF AN	Y) (Last Name First if a Person)
N			
Nations Credit	040		·
1000 Holcomb Wood Pkwy Ste	240		
Roswell, GA 30076			
Social Security/Tax ID #	<b>_</b>		
Additional secured parties on attached UCC-E			
		1995-36836	
5. This statement refers to original Financing Statement	nty Judge of Probate	Date Filed 12-27	19 95
6. Continuation. The original financing statement between	<u>, · · · · · · · · · · · · · · · · · · ·</u>	Date inco	
7. Dermination. Secured Party no longer claims a secu	rity interest under the financing statem	ent bearing the file number shown above.	
·	nancing statement bearing file number s		
Full property described in item 11 or to all a Assignment, whose name and address appears in it	of the property <b>∦</b> isted on this file, is assig tem 4.	ned to the assignee	
9. Amendment Financing statement bearing file numb	er shown above is amended as set forth		
	described in item 11 from the financing s	statement bearing file	
Release number shown above.  1.	<u></u>		
Town 6 27 06			11A. Enter Code(s) From
Tem. 6-27-96			Back of Form That Best Describes The
C06705841-809			Collateral Covered By This Filing:
			600
			<b>*</b> **
1.◆			
4			
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Check X if covered: Products of Collateral are also co	overed.	•	
		MINIM DIA 11-0	min
• · · · · · · · · · · · · · · · · · · ·	<u> </u>	+ VVVV (LX (LX (X )	-1141-
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	_
Signature(s) of Debtor(s) (necessary only if item 9 is a	pplicable)	Signature(s) of Secured Particles	e coodit
		Pully Via - Nation	3 CKEUUT
Type Name of Individual or Business	ACO COME I COMENTE COME I COME	Type Name of Individual or Business STANDARD FORM — U	INIFORM COMMERCIAL CODE — FORM UCC-
(1) FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFI	ICER COPY-ACKNOWLEDGEMENT	STANDARD FORM — C	by The Secretary of State of Alebama