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 Ning pursuant to the Uniform Cor		
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFIC Date, Time, Number & Filing Office	ÆR.	
First National Bank of known as First National P.O. Box 977 Columbiana, AL 35051	· · · · · · · · · · · · · · · · · · ·		910	910 FIED
Pre-paid Acct. #	(Last Name First if a Person)	•	96-30	96-30: CERTIF GE GF 20
Donald A. Brown Sandra J. Brown 930 Hwy 32 Columbiana, AL 35051 Social Security/Tex ID # His:			Inst # 19	09/18/19 03:50 PM SHELBY COUNTY J
2A. Name and Address of Debtor (IF A	NY) (Las Name First if a Person)			•
Social Security/Tax ID #				
Additional debtors on attached UCC-E				
3. SECURED PARTY (Last Name First If a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Lee	t Name First if a Person)
First National Bank of P.O. Box 977 Columbiana, AL 35051 Social Security/Tax ID # Additional secured parties on attached UCC-E 5. This statement refers to original Financing State		-21892		
	Judeg of Probate	- Date Filed July	21 19 94	
☐ Full property described in item 11 of Assignment, whose name and address app 9. ☐ Amendment Financing statement bearing fi	ns a security interest under the financing statement ler the financing statement bearing file number shor to all of the property listed on this file, is assign	nt bearing the file number shown above. sown above to the sed to the assignee in item 11.	ill effective.	
			Baci Best Colle	r Code(s) From k of Form That Describes The steral Covered his Filing:
			-	<u> </u>
*** *** *** *** *** *** *** *** *** **			— · — ·	
*Check X if covered: Products of Colleteral are	e also covered.	11.11. 11		
Signature(s) of Debtor(s)		(Signature(s) of Secured Partyfee	- Janes	
Signature(s) of Debtor(s) (necessary only if iter	m 9 is applicable)	William R. Justic Signature(a) of Secured Party(le)		usnel
Type Name of Individual or Business		Type Name of Individual or Busin	7:000	
(1) FILING OFFICER COPY — ALPHABETICAL (3) FIL	ING OFFICER COPY — ACKNOWLEDGEMENT E COPY — SECOND PARTY(S) (D FORM — UNIFORM COMMERC Approved by The Secretary of St	