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 presenting pursuant to the Uniform Commercial		for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		· · · · · · · · · · · · · · · · · · ·
Nations Credit 1000 Holcomb Woods Pkwy #240 Roswell, Ga 30076			34685 34685 TIFIED F PROBATE	
Pre-paid Acct. #	(Last Name First if a Person)		996	196-195 京田 京田 京田 京田 京田 京田 京田 京田 京田 京田 京田 京田 京田
Strickin, Robert E 12671 Hwy 42 Shelby, Al 35143			Inst # 19	10:43 AT 10:
Social Security/Tax ID #) (Last Name First if a Person)			•
Strickin, Patricia J 12671 Hwy 42 Shelby, Al 35143 Social Security/Tax ID #	/ ty		The same of the sa	torto energy years are a recommendation of the second
Additional debtors on attached UCC-E 3. SECURED PARTY (Last Name First if a Person)	· · · · · · · · · · · · · · · · · · ·	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (La	st Name First if a Person)
Nations Credit POB 468029 Atlanta, Ga 30346 Social Security/Tax ID #	<u> </u>	·		
5. D This statement refers to original Financing State Filed with Shelby County	tement bearing File No. 1994-05	721 2-21	19 94	
 6. Continuation. The original financing statement 7. Termination. Secured Party no longer claims 8. Partial or The Secured Party's right under property described in item 11 or Assignment. whose name and address appears 9. Amendment Financing statement bearing flie 	a security interest under the financing stateme the financing statement bearing file number sl to all of the property filted on this file, is assign	arty, bearing file number shown above, is still effect int bearing the file number shown above. nown above to the red to the assignee in item 11.	tīve.	
	•		B B C	nter Code(s) From ack of Form That est Describes The offsteral Covered y This Filling:
C44012200-809			_	
9-18-96			_	
· .			_	
	•		_	
Check X if covered: Products of Collateral are a	also covered.	<u></u>		
Signature(s) of Debtor(s)	· 	Nations Credit Signature(s) of Secured Party(les)		
Signature(s) of Debtor(s) (necessary only if item	9 is applicable)	Signature(s) of Secured Party(ies)	_ Credi	+mar
Type Name of Individual or Business	· · · · · · · · · · · · · · · · · · ·	Type Name of Individual or Business		RCIAL GODE — FORM UCC-3