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 presented to filing pursuant to the Uniform Commercial Cod	a Filing Offic e.	er for
Return copy or recorded original to	Oneda i reserres.	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		
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Pre-paid Acct.#	_		9	48 T E
2. Name and Address of Debtor	(Last Name First if a Person)		4	4 F F 4
ACKER, DOUGLA	15		9	- 4 H H H
585 County 20	469		Qi Qi	8 0 3
STEARETT, AL	25 147		₹ 1	7 Z E
WIELLE II , AL			•	46 × 8
Social Security/Tax ID			Ř t	₩ ₩ ₩
2A. Name and Address of Debtor (IF A	·		H	4 6 8 ,
ACKER, MAN	X E S			
ACKER, Fran 585 County & Dd STEWETT, AL	, 469			
CTMC MI	スペー・スプ			
SIGNETT, AL	- (- 35 7 /			
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) ((Last Name First if a Person)
Alabama Power	Co			
600 × 1845 2+	76701			
Birminsham, A	L 35291			
Social Security/Tax ID #				
Additional secured parties on attached UCC-E	·			
5. This statement refers to original Financing's		1996 - 40568	<u> </u>	/ _
Filed with Judge of Tr		Date Filed 2-10	19 4	<u>V</u>
7. Termination. Secured Party no longer claim	ns a security interest under the financing state			
☐ Full property described in item 11	der the financing statement bearing file number or to all of the property listed on this file, is as:			
	file number shown above is amended as set fo			
 Partial Secured Party releases the concept Release number shown above. 	ollateral described in item 11 from the financing	g statement bearing file		
11 Decicable Chan	D MINE SEEN	An- South Rank		
PASSIGNEE SWELL		IIII CELOPPILILITARE	11 A .	Enter Code(s) From Back of Form That Best Describes The
Pather Alm A	LADAMA LOWER	· Co.		Collateral Covered By This Filing:
•	•			
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Check X if covered: D Prodects of Colleteral ar	re also covered.			
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Signaturers of Debtor(s)	s Acken	Signature(s) of Secured Party(ies)		<u>- 1</u> <u></u> .
Signature(s) of Debtor(s) (necessary only if he	m 9 is applicable)	Signature(s) of Secured Party(ies)		
·		Type Name of Individual or Business		<u>-</u> .
Type Name of Individual or Business		Type regime of silvercual of business		<u> </u>