## STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. FORM UCC-3

18016

Important: Read Instructions on Back Before Filling out Form

☐ The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is presented to	Service Control of the Control of th
as defined in ALA CODE 7-9-105(n).	Sheets Presented:	filing pursuant to the Uniform Commercial Cod	
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
AMSOUTH BANK		į	
PO BOX 1984 🛼			
BIRMINGHAM, AL 35201			
Pre-paid Acct #	<u>,                                      </u>		
2. Name and Address of Debtor	(Last Name First if a Person	n)	
WAYMIRE, DAVID M		j	
1409 ALEXANDER CT			
	50		
ALABASTER, AL 35007915	JU		
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Social Security/Tax ID #			立 で 英葉素
2A. Name and Address of Debtor (IF AN	(Last Name First if a Persor	n)	# 2 * 5 ±
			મું તે છે ક્ર <sup>ક</sup>
WAYMIRE, SUZANNE S			
1409 ALEXANDER CT			H G G
ALABASTER, AL 3500791	50		
•			
•			
Social Security/Tax ID #		FILED WITH:	
☐ Additional debtors on attached UCC-E		SHELBY CVOUNTY	
3. NAME AND ADDRESS OF SECURED PARTY) (E	ast Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY	) (Last Name First if a Person)
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
AMSOUTH BANK			
PO BOX 1984			
BIRMINGHAM, AL 35201			
Social Security/Tax ID #			
☐ Additional secured parties on attached UCC-E			
		1001 00070	<u></u>
5. This statement refers to original Financing Sta	itement bearing File No	1994-02973	
Filed with SHELBY COUNTY		Date Filed 1/27/94	19
<ol> <li>Continuation. The original financing statemen</li> <li>Termination. Secured Party no longer claims</li> </ol>	T T	ed Party, bearing file number shown above, is still effective.	
	er the financing statement bearing file numb		
	or to all of the property listed on this file, is as	ssigned to the assignee	
Assignment. whose name and address apperage.  9.   Amendment Financing statement bearing file.	ears in item 4. e number shown above is amended as set f	forth in item 11.	
10. D Partial Secured Party releases the coll	lateral described in item 11 from the financia		
Release number shown above.			
11.			
1970 OLDSMOBILE CUTLAS	S 442		11A. Enter Code(s) From Back of Form That
SER #344870Z135062			Bost Describes The Collateral Covered
	•		By This Filling:
			<del></del>
•			
	~~!! ~ ~	21.22.12	<del></del>
Check X if covered: Products of Collateral are	also covered. Od 4 3d (	01150618-024	
	· · · · · · · · · · · · · · · · · · ·	V2 D U- U	
Signature(s) of Debtor(s)		Signature(s) of Secured Party(les)	<del></del>
Signature(s) or Deptor(s)		organication of secured Party(166)	
Signature(s) of Debtor(s) (necessary only if item	9 is applicable)	Signature(s) of Secured Party(ies)	
		AMSOUTH BANK	
Type Name of Individual or Business	AC DESIGNED CORY ACKNOWN EDGEMENT	Type Name of Individual or Susiness	FORM COMMERCIAL CODE - FORM LICC. 2