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

10134

Important: Read Instructions on Back Before Filling out Form.

ne Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is presented to a Fill filling pursuant to the Uniform Commercial Code.	ing Officer for
defined in ALA CODE 7-9-105(n).	Sheets Presented:	THIS SPACE FOR USE OF FILING OFFICER	
eturn copy or recorded original to		Date, Time, Number & Filing Office	
Gary Dean Bolton			
2541 16th Street			-
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Calera, AL* 35040			14.45 1.47 1.48 1.89 1.89 1.89 1.89 1.89 1.89 1.89 1.8
e-paid Acct. #			
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Bolton, Gary Dean		\ \	こ えを 重星
2541 16th Street		\ \	
Calera, Al 35040			4 000
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ocial Security/Tex ID #	(Last Name First if a Person)		_
ame and Address of Debtor (IF ANY)	(Last Maine First in a Corosily	t	•
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		FILED WITH:	· · · · · · · ·
ocial Security/Tax ID #			
dditional debtors on attached UCC-E		Shelby County (FAM)	(Last Name First if a Person)
AME AND ADDRESS OF SECURED PARTY) (Las	t Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	
P.O. Box 10357 Des Moines, Ia 503 Social Security/Tex ID#	06-0357		
Additional secured parties on attached UCC-E		, 	<u> </u>
	4002 22	000	<u>. </u>
☐ This statement refers to original Financing State	ment bearing File No	Date Filed_10/29/93	19
Shelnv		ed Party, bearing file number shown above, is still effective.	
☐ Partial or The Secured Party's right under ☐ Full property described in item 11 or Assignment whose name and address appear	the financing statement bearing the form to all of the property listed on this file, is a	forth in item 11.	11A. Enter Code(s) From Back of Form That Best Describes The Collegeral Covered
			By This Filing:
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•			
			
			<u> </u>
Check X if covered: Products of Collateral are	also covered.	Signature(s) of Sectives Party(ies)	ach Da
Signature(s) of Debtor(s)	· 	Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item	n 9 is applicable)	Agricredit Acceptance Type Name of Individual or Business	е Сопрапу ———
Type Name of Individual or Business		CTANDARD FORM _ 1	INIFORM COMMERCIAL CODE — FORM UC by The Secretary of State of Alabama
WALL COMMANDETICAL (3) FILL	NG OFFICER COPY-ACKNOWLEDGEMENT	Approved Approved	IN The Secretary of State of Pageonics