

1. Return copy or recorded original to  
NationsCredit  
~~P O Box 468029~~  
~~Atlanta GA 30346~~  
1000 Holcomb Woods Pkwy #240  
Roswell GA 30076

THIS SPACE FOR USE OF FILING OFFICER  
Date, Time, Number & Filing Office

1997-15618  
05/20/1997-15618  
08:30 AM CERTIFIED  
SHELBY COUNTY JUDGE OF PROBATE  
001 MCD .00

Pre-paid Acct. # \_\_\_\_\_  
2. Name and Address of Debtor (Last Name First if a Person)  
Grill, Joseph D  
137 Oak St  
Maylene AL 35114  
Social Security/Tax ID # \_\_\_\_\_

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)  
Grill, Michelle B  
Same As Above  
Social Security/Tax ID # \_\_\_\_\_

☐ Additional debtors on attached UCC-E  
3. SECURED PARTY (Last Name First if a Person)  
NationsCredit  
P O Box 468029  
Atlanta GA 30346  
Social Security/Tax ID # \_\_\_\_\_  
☐ Additional secured parties on attached UCC-E

4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

5. ☐ This statement refers to original Financing Statement bearing File No. 1994-06453  
Filed with Shelby County Date Filed February 28 19 94  
6. ☐ Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.  
7. ☒ Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.  
8. ☐ Partial or ☐ Full The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4.  
9. ☐ Amendment Financing statement bearing file number shown above is amended as set forth in item 11.  
10. ☐ Partial Release Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11. C44019023-809  
03/24/97  
11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:  
\_\_\_\_\_  
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\_\_\_\_\_

Check X if covered: ☐ Products of Collateral are also covered.  
Signature(s) of Debtor(s)  
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)  
Type Name of Individual or Business  
NationsCredit  
Signature(s) of Secured Party(ies)  
Type Name of Individual or Business