## 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 filing pursuant to the Uniform Co	mmercial Code.	Officer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFIC Date, Time, Number & Filing Office	ER	
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ALAGASCO			7	
Pre-peid Acct. #		<u> </u>	A 4 A 4 P	でする。
Name and Address of Debtor	(Last Name First If a Person)		5	26日日
MCCORMACK	, KEVIN		ğ	
2232 BANEBERRY DRIVE			44	でを重星
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Social Security/Tex ID #_			Ţ	ō g "
Name and Address of Debtor (IF A	NY) (Last Name First If a Person)	]		•
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Social Security/Tax ID #				
Additional debtors on attached UCC-E		1		
SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person
NORRELL HTG.		ALAGASCO		
Social Security/Tex ID #				
Additional secured parties on attached UCC-E		]		
This statement refers to original Financing Statement bearing File No.		#1997/01206		· ······
Filed with				<del>9</del> 7
Continuation. The original financing statement	ont between the foregoing Debtor and Secured F	arty, bearing file number shown above, is sti	il effective.	
_	ler the financing statement bearing file number s	shown above to the		
Full property described in item 11 Assignment, whose name and address app	or to all of the property listed on this file, is assigners in item 4.	ned to the assignee		
<b></b>	He number shown above is amended as set forth Hateral described in Item 11 from the financing :			
Release number shown above.				
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·			1	11A. Enter Code(s) From Back of Form That Best Describes The
				Colleteral Covered
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Chart V II coursed [7] Residence of Colleges of the				
Check X if covered: Products of Colleteral ar	e areo covered.	<del></del>	<del> </del>	<del> </del>
Signature(s) of Debtor(s)		Signatural of Secured Party(les	វ	<u> </u>
Signature(s) of Debtor(s) (necessary only if its		Signature(s) of Secured Party(les	<b>B)</b>	
Type Name of Individual or Business	<del></del>	Type Neme of Individual St 6.0	· · · · · · · · · · · · · · · · · · ·	
		STANDAR		COMMERCIAL CODE — FORM UC retary of State of Alabama