40110

## 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 Debter is a transmitting utility.	No of Additional	This EINANCING STATEMENT is presented	to a Filipa Officer for
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 filing pursuant to the Uniform Commercial C	ode.
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
KELLEY, TOMMY			
221 COMANCHE DR.	•		
MILLINGTON TN 38053			
		•	
4007445			
Pre-paid Acct #1027115			· · · · · · · · · · · · · · · · · · ·
2. Name and Address of Debtor	(Last Name First if a Person)		
NAME AND ADDRESS SAME	L AS ABOVE		* で見
NAME AND ADDRESS SAME	, AO ADOVE		
	1		
Social Security/Tax ID #			コースを置着
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)	<b></b>	# <b>4</b> 2 3
	•		* 10 20
KELLEY , MELISSA			2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
ADDRESS SAME AS ABOVE	<u> </u>		₩ Ö
		<u> </u>	
Social Security/Tax ID #			
Additional debtors on attached UCC-E			DO 0 111 5:14 - D
3. SECURED PARTY (Last Name First if a Person)	•	4. ASSIGNEE OF SECURED PARTY (IF A	(Last Name First if a Person)
SOUTHTRUST BANK, NA PO BOX 2465			
BIRMINGHAM AL 35201			
Social Security/Tax ID #			
	<del></del>	<del>-</del>	
Additional secured parties on attached UCC-E			····
5. This statement refers to original Financing Statemen	<del>-</del>		/ <sub>1</sub>
		COUNTY Date Filed	<u>+</u>
<ul> <li>6.  Continuation. The original financing statement betw</li> <li>7.  Termination. Secured Party no longer claims a sec</li> </ul>			
<u> </u>	financing statement bearing file number : It of the property fisted on this file, is assi-		
Assignment. whose name and address appears in	item 4.	•	
· · · · · · · · · · · · · · · · · · ·	nber shown above is amended as set fort I described in item 11 from the financing		
Release number shown above.			
11.			448 Enter Carleto See
			11A. Enter Code(s) From Back of Form That Best Operations The
			Best Describes The Collateral Covered
			By This Filing:
•			<del></del>
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<b>\$</b>		•	
			<u> </u>
	•		
Check X if covered: Products of Collateral are also o	covered.		
•		HOON GOOD	
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	· · · · · · · · · · · · · · · · · · ·
Signature(s) of Debtor(s) (necessary only if item 9 is a	applicable)	Signature(s) of Secured Party(less) ANK,	NA
Signature(s) of Debtor(s) (necessary only if item 9 is a  Type Name of Individual or Business	applicable)	Signature(s) of Secured Party(les) ANK,  Type Name of Individual or Business	NA