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

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 to a Fill filling pursuant to the Uniform Commercial Code.	ing Officer for	<del></del>
Return copy or recorded original to:		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	<del></del>	
	PLEASE RETURN TO:	Date, Time, Number & Fining Office		
.•	CT Corporation	•		
	Attn: Irene Newell			<b>_</b>
. •	49 Stevenson St. Ste. 300		~	w III m
	San Francisco, CA 94105		ស៊	IN H 基
	(800) 874-8820		VO.	可用養皂
Pre-paid Acct. #			<b>~</b>	OF B
2. Name and Address of Debtor	(Last Name First if a Person)		Ţ	
KILLINGSWORTH, MARY E			<b>.</b> .	第日第
24 TOMLYN ROAD MONTEVALLO, AL 35115			Š.	0 = =
MONTH VALUE OF THE	•		₹	こをき
· · ·			•	
			: • • • •	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			T.	
Social Security / Tax ID	(Lost Name First if a Darron)		C	0 4
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		<b>⊢</b>	
	•			
		:		
Social Security / Tax ID #		FILED WITH:	· · · · · · · · · · · · · · · · · · ·	
		Shelby		
Additional debtors on attached USEX	<del></del>	4 ACCIONES OF SECURED DARTY (F. ANY)	(Last Name First	if a Person)
3. NAME AND ADDRESS OF SECURED PARTY		4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Haile Free	a a resour
SPFS A DIVISION OF BAN	NK OF AMERICA FSB			
P.O. BOX 385000				
BIRMINGHAM, AL 35238				
Social Security / Tax ID #				
Additional secured parties on attached TAGE				
		<u> </u>	<u>-</u>	
5. X This statement refers to original Financing Sta	atement bearing File No. 1993-0334			
Filed with <u>Shelby</u>		Date Filled <u>2/4/93</u>		
	ant between the foregoing Debtor and Secured Part as a security interest under the financing statement	rty, bearing file number shown above, is still effective.		
	der the financing statement bearing file number sh			
Fulfi property described in item 1	In or to all of the property listed on this file, is assi			
Assignment. whose name and address ap  9. Amendment Financing statement bearing f	ppears in item 4	in item 11.	•	
	collateral described in item 11 from the financing st			
Refease number shown above.	<u> </u>		·	
11.				
Termination: The secu	ared party no longer	claims a security interest	11A. Enter Code(s) From	
under the financing a	statement bearing the	file number shown above.	Back of Form That Best Describes The	
			Collateral Covered	
			By This Filling:	600
			<u>1 0 3 </u>	<u>6 0 2 </u>
	•			
		H	<del></del>	
Ĭ.		) }	<del></del>	<del></del>
11010121	0			
1140631-	70	١ ـ		
Check X if covered: Products of Collateral are also		<b>1</b>		
	•	SPFS A DIVISION OF SANK OF	AMERICA FSB	
		JUXM IN /		
•		A MOMON ALLAN		
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)		
		THOMAS H. ADAMS, DOCUMENT	REVIEW	
•		•		
Type Name of Individual or Business	· · · · · · · · · · · · · · · · · ·	Type Name of Individual or Business		
·		STANDARD FORM - UNIFORM C	OMMERCIAL CODE - FORM	M UCC-3 AL3-0224