

1. Return copy or recorded original to

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

FIRST FAMILY FINANCIAL SERVICES, INC.
3590-A HWY 31 SOUTH
PELHAM, AL 35124

Pre-paid Acct. # **13577203**

2. Name and Address of Debtor (Last Name First if a Person)

DAVIS, KAY
1132 9TH AVE SW
ALABASTER, AL 35007

Social Security/Tax ID # [REDACTED]

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)

DAVIS, TERRY
1132 9TH AVE SW
ALABASTER, AL 35007

Social Security/Tax ID # [REDACTED]

☐ Additional debtors on attached UCC-E

3. SECURED PARTY (Last Name First if a Person)

FIRST FAMILY FINANCIAL SERVICES, INC.
3590-A HWY 31 SOUTH
PELHAM, AL 35124

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. **1998-01979**
Filed with **SHELBY COUNTY JUDGE OF PROBATE**

Date Filed **01/21** 19 **98**

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 Assignment. 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.

11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

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

Signature(s) of Secured Party(ies)

Signature(s) of Secured Party(ies)

FIRST FAMILY FINANCIAL SERVICES, INC.

Type Name of Individual or Business

(1) FILING OFFICER COPY — ALPHABETICAL
(2) FILING OFFICER COPY — NUMERICAL

(3) FILING OFFICER COPY — ACKNOWLEDGEMENT
(4) FILE COPY — SECOND PARTY(S)

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3
Approved by The Secretary of State of Alabama