STATE OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

Important: Read Instructions on Back Before Filling out Form.

Return copy or recorded original to Mutual Savings Credit Union 3596 Pelham Parkway Pelham, AL 35124	THIS SPACE FOR USE OF FILING OFFICE Date. Time, Number & Filing Office		
Mutual Savings Credit Union 3596 Pelham Parkway	Date, Time, Number & Filing Office	· ·	
3596 Pelham Parkway			
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Tellian, al 37124		sea.	13 13
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		Q.	OF 5
Pre-paid Acct #		1 50	60 III ES
Name and Address of Debtor (Last Name First if a Person)		·	ğ u m
Edmonds, Micheal L		Ų1 ų1	W X E E
1357 3rd Court SW			
Alabaster, AL 35007			20 2
		<u>C</u>	0 1 "
Social Security/Tax ID #			•
A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)			
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		•	
		•	
Constant Constant (Tour ID #			
Social Security/Tax ID #		:	
Additional debtors on attached UCC-E	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Nat	me First if a Person)
SECURED PARTY (Last Name First if a Person)	4. ASSIGNED OF SECONED FAITH	(
Mutual Savings Credit Union	;		
3596 Pelham Parkway	•		
Pelham, AL 35124	1		
Social Security/Tax ID #	-		
Additional secured parties on attached UCC-E			
5. $\sqrt{\chi}$ This statement refers to original Financing Statement bearing File No. 1996 =261	7 		
Filed with Shelby County Probate Office	Date Filed 8/13	19_96	
6. Continuation. The original financing statement between the foregoing Debtor and Secured 7. Termination. Secured Party no longer claims a security interest under the financing statement 8. Partial or The Secured Party's right under the financing statement bearing file number property described in item 11 or to all of the property listed on this file, is ass whose name and address appears in item 4. 9. Amendment Financing statement bearing file number shown above is amended as set for Secured Party releases the collateral described in item 11 from the financing number shown above.	nent bearing the file number shown above. I shown above to the signed to the assignee of the item 11.	ili effective.	
1.			
1- 1986 Hammond Stryker SYKH 2019C586	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:		of Form That escribes The oral Covered
1 <u>-</u> 1986 Chevy Motor Magnum 260/350 ID A	508199		
1- Trailer AL 1442 WD		<u> </u>	
	I		
			
Check X If covered: Products of Colleteral are also covered.	Δ		 .
	Linal Du	Her	
Signature(s) of Debtor(s)	Signature(s) of Secured Party(in	86)	
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Signature(s) of Secured Party(in		
Micheal L Edmonds	Mutual Savings Credit Union		
Type Name of Individual or Business	Type Name of Individual or But	<u> </u>	L CODE — FORM UCC-3