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.

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☐ The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is presented to a filing pursuant to the Uniform Commercial Code		er for	
as defined in ALA CODE 7-9-105(n). Sheets Presented: 1. Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER	<u>. </u>		
First National Bank of She P. O. Box 977	1by County	Date. Time, Number & Filing Office			
Columbiana, AL 35051		· ·			
Pre-paid Acct. #	<u> </u>	• -		į	
Name and Address of Debtor Rowland R. Holcomb	(Last Name First if a Person)		æ ₩	∞ 🗎	띹
520 Fairway Drive			36	61 -1	PROBATE .00
Jacksonville, AL 36265			₩.	Ŷ.	도 다. 남
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Social Security/Tax ID #	(Last Name First if a Person)		#	⇒ ₹	COUNTY OO CR
Betty C. Holcomb		<u>1</u> ⋮	44	è 🖈	SHELBY
520 Fairway Drive		i { #	Ě		똜
Jacksonville, AL 35265			şed	103	
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		. **			
Social Security/Tax ID #		ا امخا			
☐ Additional debtors on attached UCC-E					
3. SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF ANY)) {I	Last Name First if	(a Person)
First National Bank of She P. O. Box 977	erby County	-			
Columbiana, AL 35051					
OOLGED LOUIS 1120 DOOS					
Social Security/Tax ID #		 			
Additional secured parties on attached UCC-E					
5.XX This statement refers to original Financing Stateme	ent bearing File No.	1997-26280			
Filed with She1by Count	y Judge of Probate	Date Filed August 18	1 <u>99</u>	7	
Full property described in item 11 or to a Assignment whose name and address appears it. 9. Amendment Financing statement bearing file nut	ecurity interest under the financing stateme infinancing statement bearing file number st all of the property listed on this file, is assign	nt bearing the file number shown above. hown above to the ned to the assignee in item 11. 1			
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				Best Describes 1 Collateral Cover	The
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Check X if covered: Products of Collateral are also	covered.				
·		First National Bank of S	Shelbv	County	
Signature(s) of Debtor(s)		Signal(y)6(s) of Secured Party(les)			
Signature(s) of Debtor(s) (necessary only if item 9 is	applicable)	Signature(s) of Secured Party(ies)			
		William R. Justice, In-I	House	Counsel	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	OFFICER COPY ACKNOWLEDGEMENT PY SECOND PARTY(S)	STANDARD FORM — UN		MERCIAL CODE — y of State of Alaban	