UCC-3 A92 (AL)

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 as defined in ALA CODE 7-9-105(n)	No. of Additional Sheets Presented:		filing pursuant to the	TATEMENT is presented e Uniform Commercial C	to a Filing Officer to Code	·· ············
Return copy or recorded original to	<u> </u>	į	THIS SPACE FOR USE OF F Date, Time, Number & Filing	ILING OFFICER Office		
NORWEST FINANCIAL AL 1841 MONTGOMERY HWY HOOVER AL 35244	ABAMA INC SUITE 105				(C	Ω Ευ Ευ
		:			S S	50 E E E E
Pre-paid Acct #					9	
Name and Address of Debtor ROBYN H MECHE	(Last Name First if a	Person)			Q) Q)	66 元 元 元 元 元
907 10TH ST SW					5	₹
ALABASTER AL 35007					*	STA SE
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Social Security/Tax ID #	(Last Name First if a	Person)			H	J FO
2A Name and Address of Debtor (IF ANY) DOANLD J MECHE	(Last Hame I hat is a					
907 10TH ST SW						
ALABASTER AL 35007						
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Social Security/Tax ID #	<u> </u>					
Additional debtors on attached UCC-E	<u>. </u>		4 ASSIGNEE OF SECURE	D PARTY (IF A	ANY) (Last	Name First if a Person)
3. SECURED PARTY (Last Name First if a Person) NORWEST FINANCIAL A	LABAMA INC					
1841 MONTGOMERY HWY	SUITE 105	!				
HOOVER AL 35244						
Social Security/Tax ID #	·					
☐ Additional secured parties on attached UCC-E		·				
5 This statement refers to original Financing State	oment bossion File No	997-03				
Filed withSHELBY_CO	UNTY JUDGE C	OF PRO)BATE Date Filed_	2/5/97	19	
8 Partial or The Secured Party's right under Full property described in item 11 or Assignment whose name and address appear 9	a security interest under the finance the financing statement bearing fit to all of the property listed on this	cing statement te number sho tile, is assigne d as set forth in	bearing the life number sho win above to the ed to the assignee	vn above, is still effective		
11.					11A. En	ter Code(s) From
					Ba Be	ck of Form That est Describes The Illateral Covered
						This Filling:
						
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Check X if covered: Products of Collateral are	also covered		<u> </u>			
			Signature(s) of Se	ecured Partylies)	1	<u></u>
Signature(s) of Debtor(s)						
Signature(s) of Debtor(s) (necessary only if item	9 is applicable)		Signature(s) of Se	FINANCIAL	ALABAM	A INC
Type Name of Individual or Business			Type Name of Inc	standard soom		BOIAL CODE - FORM UCC-3