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.

The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is prifiling pursuant to the Uniform Comm	resented to a Filing O	fficer for
as defined in ALA CODE 7-9-105(n). Return copy or recorded original to	Sheets Presented:	THIS SPACE FOR USE OF FILING OFFICER		<u> </u>
NORWEST FINANCIAL ALABAM	MA INC	Date, Time, Number & Filing Office	a	0 11 12
235 LAKESHORE PKWY		-	Ď	OF HISE
HOMEWOOD ALABAMA 35209	<u>.</u>		ă	
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Pre-paid Acct.#			67	5年
Name and Address of Debtor	(Last Name First if a Person)		. ·	
JOHN T CARLISLE				7 1 2 E
318 STONE CROFT CIRCLE			N.	20 点器
HELENA AL 35080			C.	
· · · · · · · · · · · · · · · · · · ·		-	•	
	~			
Social Security/Tax ID #	(Lest Name First if a Parent)			
A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)			
LIZ C CARLISLE	•			
318 STONE CROFT CIRCLE				
HELENA AL 35080				
0				
Social Security/Tax ID #				•
Additional debtors on attached UCC-E SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person)
COUNCE PART (Cast Name (name (name)				
NORWEST FINANCIAL ALABAM	1A INC			
235 LAKE SHORE PKWY	•			
HOMEWOOD AL 35209				
Social Security/Tax ID #	<u></u>	_		
Additional secured parties on attached UCC-E			···	······································
5. This statement refers to original Financing States	ment bearing File No. 1997-147	 		
Filed with SHELBY COUNTY JUI	OGE OF PROBATE	Date Filed <u>U.5 / 1 / /</u>		<u>97</u>
8. Partial or The Secured Party's right under the property described in item 11 or to Assignment. Whose name and address appears 9. Amendment Financing statement bearing file in	security interest under the financing statement bearing file number so all of the property listed on this file, is assign	ent bearing the file number shown above shown above to the gned to the assignee h in item 11.		
†1. ·				11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
·	· · ·			
•				
	_	A A_	_	
Check X if covered: Products of Collateral are al	so covered.	Signature(s) of Secured Party(ies	Man	slall
Signature(s) of Debtor(s)		, ·		
Signature(s) of Debtor(s) (necessary only if item 9 Type Name of Individual or Business) is applicable)	Signature(s) of Secured Party(les NORWEST FINANCIAL Type Name of Individual or Busin	ALABAMA IN	
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