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.

| The Debtor is a transmitting utility | No. of Additional Sheets Presented: | This FINANCING STATEMENT is presented to a Filing Officer for tiling pursuant to the Uniform Commercial Code. | | |
|--|--|---|--------------------|--|
| as defined in ALA CODE 7-9-105(n). Sheets Presented: Return copy or recorded original to | | THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office | | |
| NORWEST FINANCIA 1841 MONTGOMERY HOOVER AL 35244 | | Date, Time, Number & Fridge Office | • | |
| | | | | later 1 |
| Pre-paid Acct. # 2. Name and Address of Debtor MARY SALTER | | 1.00m | | |
| 1025 ISLANE STRE MONTEVALLO AL 3 | 4-000 x CERT TO THE STATE OF TH | | | |
| Social Security/Tax ID # | Y) (Last Name First if a Person) | | ₩. | |
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| | | | | |
| Social Security/Tax ID # | | _ | | |
| Additional debtors on attached UCC-E | | | ALIAN ON | (Last Name First if a Person) |
| 3. SECURED PARTY (Last Name First if a Person) | | 4. ASSIGNEE OF SECURED PARTY | (IF ANY) | trest table t ust u t t tagott) |
| NORWEST FINANICA 1841 MONTGOMERY HOOVER AL 35244 | HWY SUITE 105 | | | |
| Social Security/Tax ID # Additional secured parties on attached UCC-E | | | | |
| 5. This statement refers to original Financing Sta | atement bearing File No. | 296/36601 | | |
| Filed withSHELBY_COL | | DBATE Date Filed | 11/4/199 | 6 |
| 8. Partial or The Secured Party's right under Described in item 11 of Describe | s a security interest under the financing statemer the financing statement bearing file number or to all of the property listed on this file, is assigned. | nent bearing the file number shown above. shown above to the igned to the assignee th in item 11 | till effective | |
| | | | 1 | 1A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: |
| | | | | |
| | ÷; | | | |
| Check X if covered: Products of Collateral are | e also covered | | | |
| Signature(s) of Debtor(s) | · | Signature(s) of Secured Party(i | es) | ~ <u>~</u> _ |
| Signature(s) of Debtor(s) (necessary only if iter | m 9 is applicable) | Signature(s) of Secured Party(in | es) | <u> </u> |
| Type Name of Individual or Business | · · · · · · · · · · · · · · · · · · · | Type Name of Individual or 50: | IANCIAL AL | ABMA INC |