## 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.

		. —	Charles (
The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is presented filing pursuant to the Uniform Commercial	to a Filing Officer 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	~ = ==================================
Alabama Power Company 600 North 18th Street Birmingham, AL. 35291-1135 Attn: Division Accounting Services		Date, Time, Number & Filing Office  CO-02807  CERTIFIE  SERTIFIE  OC. 98807  OC. 98807	
		•	00
Name and Address of Debtor Chrin, Karen L. 1521 Tropical Ln. Alabaster, Al. 350	(Last Name First if a Person)		10=5+ + CON SELEN CON SEL
Social Security/Tax ID #	(Last Name First if a Person)		
Social Security/Tax ID #			
Additional debtors on attached UCC-E			
Alabama Power Company 600 North 18th Street Birmingham, AL. 35291-1135 Attn: Division Accounting Services Social Security/Tax ID #		Answere of Secured Party (F ANY) (Last Name First if a Person) Amsouth Bank of Alabama Riverchase Center North Bldg 2050 Parkway Office Center Hoover, Al. 35244	
Additional secured parties on attached UCC-E			
· · · · · · · · · · · · · · · · · · ·	1006 36	900	
☐ This statement refers to original Financing State	oment bearing File No. <u>1990-30</u> V Judge of Probate	Date Filed 10/31	19 96
Continuation. The original financing statement  Termination. Secured Party no longer claims to the Secured Party's right under property described in item 11 or to the Assignment. Whose name and address appearance of the Amendment Pinancing statement bearing file.	between the foregoing Debtor and Secured Pa a security interest under the financing statement the financing statement bearing file number shot all of the property listed on this file, is assign	arty, bearing file number shown above, is still effective intibearing the file number shown above. Hown above to the need to the assignee in item 11.	
			11A. Enter Code(s) From Back of Form That Best Describes The Colleteral Covered By This Filling:
	•		
Check X if covered: Products of Collateral are a	iso covered.		
Signature(s) of Debtor(s)	<del></del> _	Signature(s) of Segurot Party(les)	· · · · · · · · · · · · · · · · · · ·
Signature(s) of Debtor(s) (necessary only if item	9 is applicable)	Signature(s) of Secured Party(les)	
Type Name of Individual or Business		Amsouth Bank Type Name of Individual or Business	· <del>- · · · · · · · · · · · · · · · · · ·</del>

(5) FILE COPY DEBTOR(S)

(3) FILING OFFICER COPY — ACKNOWLEDGEMENT

(4) FILE COPY — SECOND PARTY(S)

(1) FILING OFFICER COPY - ALPHABETICAL

(2) FILING OFFICER COPY — NUMERICAL

STANDARD FORM - UNIFORM COMMERCIAL CODE -- FORM UCC-3

Approved by The Secretary of State of Alabama