

1. Return copy or recorded original to

FIRST NATIONAL BANK OF SHELBY COUNTY  
PO DRAWER 10  
WILSONVILLE, AL 35186

Pre-paid Acct #

2. Name and Address of Debtor (Last Name First if a Person)

PARTRIDGE, BILL W  
PO BOX 301  
SHELBY, AL 35143

Social Security/Tax ID #

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)

Social Security/Tax ID #

☐ Additional debtors on attached UCC-E

3. SECURED PARTY (Last Name First if a Person)

FIRST NATIONAL BANK OF SHELBY COUNTY  
9833 MAIN STREET, PO DRAWER 10  
WILSONVILLE, AL 35186

Social Security/Tax ID #

☐ Additional secured parties on attached UCC-E

THIS SPACE FOR USE OF FILING OFFICER  
Date, Time, Number & Filing Office

Inst # 2000-18305

06/05/2000-18305  
10:21 AM CERTIFIED  
SHELBY COUNTY JUDGE OF PROBATE  
001 NEL .00

4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

5. ☐ This statement refers to original Financing Statement bearing File No. 1999-06995  
Filed with SHELBY COUNTY JUDGE OF PROBATE Date Filed 02/19/1999 19

6. ☐ Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.

7. ☒ Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.

8. ☐ Partial or ☐ Full Assignment. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4.

9. ☐ Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.

10. ☐ Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11.

11A Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

600

Check X if covered: ☐ Products of Collateral are also covered.

Signature(s) of Debtor(s)

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Type Name of Individual or Business

Signature(s) of Secured Party(ies)

Signature(s) of Secured Party(ies)

FIRST NATIONAL BANK OF SHELBY COUNTY

Type Name of Individual or Business