## STATE OF ALABAMA—UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC.—FROM UCC—3 Important: Read Instructions on Back Before Filling out Form.

☐ The Debtor is a tra	<del>-</del> -	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing filing pursuant to the Uniform Commercial Code.	g Officer for
Return copy or recorded original to			THIS SPACE FOR USE OF FILING OFFICER	<u> </u>
Jefferson County Employees Credit Union			Date, Time, Number & Filing Office	
	21st Street			
Birmingha	ım, AL 35263			
J				
2. Name and Addres		st Name First if a Person)		<b>9</b>
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MATTHEW DANIELS  CEPED DANIELS PIDMINGHAM AT 25202				
C FRED DANIELS BIRMINGHAM AL 35203				
BIRMINGHAM, AL 35203				
Social Security/Ta				
2A. Name and Addres	ss of Debtor (IF ANY) (La	st Name First if a Person)		14、01 年 彦 第
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•				
Social Security/Ta	ax ID #		FILED WITH:	
☐ Additional debtors			FILLED TATION.	
	RESS OF SECURED PARTY (Last Name F	irst if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
Jefferson	County Employees Credit U	Inion		,
	h 21st Street			
Pirmingi	nam, AL 35263			
Social Security/Ta	ax ID #			
	parties on attached UCC-E			
5. 🔲 This statement	refers to original Financing Statement be	earing File No	/ F1 A E	
Filed with	Shelby Count		Date Filed 6 - 044	<u>, 99</u>
<ul> <li>6. Continuation The original financing)statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.</li> <li>8. Partial or Full 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.</li> <li>9. Amendment Financing statement bearing file number shown above is amended as set forth in item 11</li> <li>10. Partial Release Release number shown above.</li> </ul>				
11.	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
				11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
				<del></del>
Check X if covere	d: Products of Collateral are also cove	ered. 	····	
	• · · · · · · · · · · · · · · · · · · ·		Hacie Cones	
Signature(s) of De	ebtor(s)		Signature(s) of Secured Party(ies)	· · · · · · · · · · · · · · · · · · ·
Signaturado) of Daharda) de company and the same and the			U	
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)			Signature(s) of Secured Party(ies)	
Type Name of Indi	ividual or Business		Type Name of Individual or Business	
(1) FILING OFFICER CO	+## <b></b>	CER COPY—ACKNOWLEDGEMEN		MMERCIAL CODE—FORM UCC-3

(5) FILE COPY DEBTOR(S)

(2) FILING OFFICER COPY—NUMERICAL

(4) FILE COPY—SECURED

STANDARD FORM—UNIFORM COMMERCIAL CODE—FORM UCC-3

Approved by The Secretary of State of Alabama