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STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

48569

(1) FILING OFFICER COPY - ALPHABETICAL

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Important: Read Instructions on Back Before Filling out Form.

REORDER FROM

Registré Inc.

514 PIERCEST.

P.O. BOX 215

STANDARD FORM - LINIFORM COMMEDIAL CODE - FORMUCC 2

			.4:	(4) 421-1713	
The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to filling pursuant to the Uniform Commercial Co	a Filing Officer	for	
Return copy or recorded original to FIRST COMMERCIAL BANK	J Griceto Fresentico.	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office			<u> </u>
P. O. BOX 11746		· _			
BIRMINGHAM, AL 35202-	1746		07	다 일 일	
ATTN: SUSAN BLEVINS		328	328	F 7808.	
Pre-paid Acct. #		\ 	, 6	12 m	
2. Name and Address of Debtor	(Last Name First if a Person)	֓֞ ֞			
KIDD, JACK W.		[นี ผู้	# <u>F</u> = 53	
5492 HWY 280 EAST		,	₩ છે.	_ <u>5</u> _	
BIRMINGHAM, AL 35242			₩ -	25 50 50 50 50 50 50 50 50 50 50 50 50 50	
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Social Security (Tay IO #			Ä	Ŧ	
Social Security/Tax ID #	NY) (Last Name First if a Person)				
Social Security/Tax ID #		FILED WITH:	<u>_</u>		- ·
☐ Additional debtors on attached UCC-E		SHELBY COUNTY JUDGE OF	PROBATE		
3. NAME AND ADDRESS OF SECURED PARTY)	(Last Name First if a Person)	4 NAME AND ADDRESS OF ASSIGNEE OF SECURED PART	(IF ANY)	(Last Name First if a l	Person)
FIRST COMMERCIAL BANK					
P. O. BOX 11746 BIRMINGHAM, AL 35202-	.1746				
BIRMINGHAM, AL 33202-	1740				
Social Security/Tax ID #					
Additional secured parties on attached UCC-E					·
5. CXTEX DAY CONTINUES			···	-	
	JUDGE OF PROBATE	Date Filed 10/13/95		<u> </u>	
 ✓ Termination. Secured Party no longer claim 	is a security interest under the financing stateme	arty, bearing file number shown above, is still effective. Int bearing the file number shown above.			
	ler the financing statement bearing file number st or to all of the property listed on this file, is assign				
Assignment, whose name and address appoint		-			
	illateral described in item 11 from the financing s				
11.	1005 0000	· · · · · · · · · · · · · · · · · · ·			
CONTINUATION OF FILE #	1995-29303		11 A . Er	nter Code(s) From	
			Ba Ba	ack of Form That est Describes The	
				ollateral Covered / This Filling:	
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Check X if covered: Products of Collateral are	a ateo covered		_	- 	
TOULUS OF COMMERCIAL AFE	, DIOU COYELEU.	DIROR GOLDEN OF LE + 1			
Signature(s) of Debtor(s)		FIRST COMMERCIAL BANK	<i>)</i>	- <u></u>	
		BY: De Secure Persylles)	ta-		
Signature(s) of Debtor(s) (necessary only if item	n 9 is applicable)	Signature(s) of Secured Party(ies)			
Type Name of Individual or Business		Type Name of Individual or Business			<u></u> .