## 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 as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presentiling pursuant to the Uniform Commercial	ited to a Filing Officer for ial Code.
Return copy or recorded original to     Alabama Power Compan	·	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
600 North 18th Street			
Birmingham, Alabama 35291			
Pre-paid Acct. #	d cot blown Flort M o Bosson)		
2. Name and Address of Debtor	(Last Name First If a Person)		
Joseph A. Robitaille Helen O. Robitaille			
103 Hickory Street			d La
Columbiana, AL 35051			
00201110711107			
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Social Security/Tax ID #	(Last Name First if a Person)		
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		  -	_
			-1 <sub>6</sub> 1
Social Security/Tax ID #			-
Additional debtors on attached UCC-E			
3. SECURED PARTY (Last Name First if a Person)	#	4. ASSIGNEE OF SECURED PARTY (	IF ANY) (Last Name First if a Person)
Alabama Power Compan	y		
600 North 18th Street	25201		
Birmingham, Alabama 3	22791		
Social Security/Tax ID #	· · · · · · · · · · · · · · · · · · ·		
Additional secured parties on attached UCC-E			
5. This statement refers to original Financing States	nent bearing File No. 1997-	40317	<del></del>
Filed with Judge of Probat	te Shelby County	Desceried 2th	<u> 1997<sub>20</sub> </u>
Full property described in item 11 or to Assignment. whose name and address appears 9. Amendment Financing statement bearing file not 10. Partial Secured Party releases the collate number shown above.	security interest under the financing statement bearing file number so all of the property listed on this file, is assign	ent bearing the file number shown above.  hown above to the ned to the assignee in item 11.	ive.
11.			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
			<del></del>
			<del></del>
			<del></del>
Check X if covered: Products of Collateral are als	o covered.	.Λ	
		1 1 the of	Tour
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	<del>\</del>
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Signature(s) of Debtor(s) (necessary only if item 9	la applicable)	Signature(s) of Secured Party(ies)	
Type Name of Individual or Business		Alabama of Individual & Business E	<del>pany</del>