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OL	C FINANCING STATEMENT AMENDN LOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional]	/ENT	# 19 # 19 # 19 # 19 # 19 # 19 # 19 # 19
	ATRICIA HUNTLEY/205-226-1925 SEND ACKNOWLEDGMENT TO: (Name and Address)		
	ALABAMA POWER COMPANY 600 NORTH 18TH STREET BIRMINGHAM, AL 35291		13/56/200
	INITIAL FINANCING STATEMENT FILE # 34821/SHELBY	THE AB	1b. This FINANCING STATEMENT AMENDMENT to be filed [for record] (or recorded) in the
. [TERMINATION: Effectiveness of the Financing Statement Identified a CONTINUATION: Effectiveness of the Financing Statement Identification continued for the additional period provided by applicable law.		· · · · · · · · · · · · · · · · · · ·
	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7	7b and address of assignee in item 7c; and also giv	ve name of assignor in item 9.
	CHANGE name and/or address: Give current record name in item 6a or name (if name change) in item 7a or 7b and/or new address (if address current RECORD INFORMATION: 6a. ORGANIZATION'S NAME	6b; also give new DELETE name: Give new to be deleted in item 6a	
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	вь. individual's last name PARKER	FIRST NAME RALPH	MIDDLE NAME SUFFIX E.
. C	PARKER CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	E. MIDDLE NAME SUFFIX
. C	PARKER CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	RALPH	E.
. c	PARKER CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME PARKER	FIRST NAME PATSY CITY ALABASTER	MIDDLE NAME M. STATE POSTAL CODE AL 35007
c. N	PARKER CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME PARKER MAILING ADDRESS 19 6TH AVE NW TAX ID #: SSN OR EIN ADD'L INFO RE 7a. TYPE OF ORGANIZATION DEBTOR D	FIRST NAME PATSY CITY ALABASTER	MIDDLE NAME M. STATE POSTAL CODE AL 35007
R 2 1	PARKER CHANGED (NEW) OR ADDED INFORMATION: 7B. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME PARKER MAILING ADDRESS 19 6TH AVE NW TAX ID #: SSN OR EIN ADD'L INFORE 76. TYPE OF ORGANIZATION	FIRST NAME PATSY CITY ALABASTER ON 71. JURISDICTION OF ORGANIZATION	MIDDLE NAME M. STATE POSTAL CODE AL 35007 7g. ORGANIZATIONAL ID #, if any
R 2 1 1 N ac	PARKER CHANGED (NEW) OR ADDED INFORMATION: 76. ORGANIZATION'S NAME 76. INDIVIDUAL'S LAST NAME PARKER MAILING ADDRESS 19 6TH AVE NW TAX ID #: SSN OR EIN ADD'L INFO RE 76. TYPE OF ORGANIZATION DEBTOR MENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME PATSY CITY ALABASTER ON 71. JURISDICTION OF ORGANIZATION collateral description, or describe collateral 1S AMENDMENT (name of assignor, if this is an	MIDDLE NAME M. STATE POSTAL CODE AL 35007 7g. ORGANIZATIONAL ID #, If any assigned.
C R R R R R R R R R R R R R R R R R R R	PARKER CHANGED (NEW) OR ADDED INFORMATION: Ta. ORGANIZATION'S NAME	FIRST NAME PATSY CITY ALABASTER ON 71. JURISDICTION OF ORGANIZATION collateral description, or describe collateral 1S AMENDMENT (name of assignor, if this is an	MIDDLE NAME M. STATE POSTAL CODE AL 35007 7g. ORGANIZATIONAL ID #, If any assigned.