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.

REORDER FROM

Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 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 pres filing pursuant to the Uniform Comme	sented to a Filing Officer for ercial Code.
Return copy or recorded original to	· <u>··</u>	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Citicorp National formally known as Citicorp Acceptar P.O. Box 790142 St. Louis, MO. 63	ice Co. Inc.		15329 TIFIED F PROPRE
Pre-paid Acct. #			4 温波
Ledlow, Norman D. P.O. Box 86 Vandiver, AL. 351			105/11/199 05/11/199 05:30 AM C
Social Security/Tax ID # A. Name and Address of Debtor	(IF ANY) (Last Name First if a Person)		
Ledlow, Mickey same			
Social Security/Tax ID #	<u>. </u>	FILED WITH:	<u> </u>
Additional debtors on attached UCC-E			(IF ANY) (Last Name First if a Person)
formally known as Citicorp Acceptar P.O. Box 790142 St. Louis, MO. 63	nce Co. Inc.		·
Additional secured parties on attached UC	Δ1	9780	
5. This statement refers to original Finance Shelby Co.	Shift Statement pashing the No.	Date Filed 4-12	19.88
6. Continuation. The original financing of 7. Armination. Secured Party no longer 8. Partial or The Secured Party's rig property described in its Assignment. Whose name and address 9. Amendment Financing statement beautiful property.	tatement between the foregoing Debtor and Secure r claims a security interest under the financing state ht under the financing statement bearing file number om 11 or to all of the property listed on this file, is as	sment bearing the file number shows above. If shown above to the signed to the assignee orth in item 11.	fective.
008-537068			11A Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling: 600 602
Check X if covered: Products of Collat	erai are siso covered.		L
Signature(s) of Debtor(s)	· · · · · · · · · · · · · · · · · · ·	Citicorp Na Signature(s) of Secured Party(ies)	tional Services, Inc.
Signature(s) of Debtor(s) (necessary on	ly if item 9 is applicable)	Signature(s) of Secured Party(ies)	
		Type Name of Individual or Busine	## O
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (2) FILING OFFICER COPY - NUMERICAL	(3) FILING OFFICER COPY-ACKNOWLEDGEMENT (4) FILE COPY - SECURED	STANDARD	FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3 Approved by The Secretary of State of Alabama