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

Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-3713

☐ 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 Corcial Code.	Officer for
Return copy or recorded original to ITICORP NATIONAL SERVICES, INC		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		
ormerly known as:	,			
ITICORP ACCEPTANCE CO.,	INC.			
.O. BOX 790142			CÜ.	
T. LOUIS, MO 63179			Ö,	_
			358	œ ⊞ ⊭
Pre-paid Acct. # 2. Name and Address of Debtor	(Last Name First if a Person)		Ĭ	6
RANCH, JAMES E.			9	6 7 8 3 6 4 8 8
OUTE 2 BOX 75 E			64	1 12
OLUMBIANA, AL 35051-980)2		4	4 00 計 開
			ιğ.	7
Social Security/TaxID #			H	
2A. Name and Address of Debtor (IF A	(NY) (Last Name First if a Person)		·	可证器
BRANCH, MYRA J.				T Ö
SAME				
O/MAL				
		ED ED MOTH.		·
Social Security/Tax ID #		FILED WITH:		
Additional debtors on attached UCC-E	(I not Name First if a Person)	4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person)
3. NAME AND ADDRESS OF SECURED PARTY) CITICORP NATIONAL SERVICE		4. ASSIGNEE OF SECONED PARTY	(11 7011)	(Date Marine Marine Description
formerly known as:	-0, 1/10			
CITICORP ACCEPTANCE CO	INC.			
P.O. BOX 790142				
ST stonistoning/MAD # 63179				
☐ Additional secured parties on attached UCC-E				
5. This statement refers to original Financing S	Statement bearing File No. 11897			_
Filed withSHELBY COUNTY		Date Filed5/55		
6. Continuation. The original financing statem	ent between the foregoing Debtor and Secured F	Party, bearing file number shown above, is still eff	fective.	
8. Partial or The Secured Party's right un-	ms a security interest under the financing statement der the financing statement bearing file number s	shown above to the		
☐ Full property described in item 11 Assignment whose name and address ap	for to all of the property listed on this file, is assign opears in item 4.	gned to the assignee		
9. Amendment Financing statement bearing	file number shown above is amended as set forti	h in item 11.	•	
10. Partial Secured Party releases the c Release number shown above.	collateral described in item 11 from the financing :	Statement bearing me		<u> </u>
11.				
016 578781			•	11A. Enter Code(s) From Back of Form That
				Best Describes The Collateral Covered
				By This Filling: 6 0 0 6 0 2
				
Check X if covered: Products of Collateral a	are also covered	1	1	
Check An Covered. El Products di Conateral a	ALC MISO COTOLOG.		10 ~~-	
Cianah rada) of Dahtaria	<u> </u>	Signature(s) of Secured Party(ies)	tem	
Signature(s) of Debtor(s)				
Signature(s) of Debtor(s) (necessary only if it	tem 9 is applicable)	Signature(s) of Secured Party(ies) CITICORP NAT	IONAL SER	VICES, INC.
Type Name of Individual or Business		Type Name of Individual or Busines		