## 01101 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

- <del> </del>			
☐ 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 a filling pursuant to the Uniform Commercial Code	t Filing Officer for
Return copy or recorded original to     CITICORP NATIONAL SERVICES., INC.		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
formerly known as:			
CITICORP ACCEPTANCE CO., INC.			<b>.</b>
15851 CLAYTON RD.			· • • • • • • • • • • • • • • • • • • •
ST. LOUIS, MO 630112297			···
Pre-paid Acct. #			, man
2. Name and Address of Debtor	(Last Name First if a Person)		
WITH COM ALLEN E			
WILSON, ALLEN E. RT. 1 BOX 410			
WILSONVILLE, AL 35186	5		
,			が 8 日 夏
Social Security/Tax1D #  2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)	<b></b>	# 14 E E E E E E E E E E E E E E E E E E
<u>-</u>			- L - C
•			75.75 35.70 8.03.8
WILSON, LARA M.			
SAME			<b>₹</b> ₹
			y . \$**
Social Security/Tax ID #		FILED WITH:	, , , , , , , , , , , , , , , , , , ,
	· · · · · · · · · · · · · · · · · · ·		
☐ Additional debtors on attached UCC-E  3. NAME AND ADDRESS OF SECURED PARTY) (Last	Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
CITICORP NATIONAL SERV			
formerly known as:			
CITICORP ACCEPTANCE CO	D., INC.		
15851 CLAYTON RD.			
ST. LOUIS, MO 630112297			
☐ Additional secured parties on attached UCC-E	<u></u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·
5. This statement refers to original Financing Statement bearing File No. 013215  Filed with SHELBY COUNTY			. <del></del>
		Date Filed11/26	19 <u>8.5</u>
☐ Full property described in item 11 or to a Assignment. whose name and address appears i  9. ☐ Amendment Financing statement bearing file num  10. ☐ Partial Secured Party releases the collaters  Release number shown above.	ecurity interest under the financing statemer financing statement bearing file number s all of the property listed on this file, is assig	ent bearing the file number shown above. shown above to the gned to the assignee in item 11.	
11.			
008 527325			11A. Enter Code(s) From Back of Form That Best Describes The
000 02/327	•	-	Collateral Covered  By This Filing:
	•		<u>600 602</u>
	• ·	•	
	•	•	<del></del>
Check X if covered: Products of Collateral are also	covered.		
	-	(1) カガニー	2000- /
Signature(s) of Debtor(s)	·	Signature(s) of Secured Party(es)	- 11n
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies) CITICORP NATIONAL SERV	ICES., INC.
Type Name of Individual or Business as:		Type Name of Individual or Business  STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3	