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 presented to a filing pursuant to the Uniform Commercial Code.	Filing Officer for
Return copy or recorded original to	Siledia Flascines.	THIS SPACE FOR USE OF FILING OFFICER	
CITICORP ACCEPTANCE CO.	TNY	Date, Time, Number & Filing Office	
ADD BELOW	, 1140.		
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Pre-paid Acct. #	<u> </u>		
Name and Address of Debtor	(Last Name First if a Person)		
COUNTREVOIDS TO ALTH MEDIT ON			g gus
STAFFORD, PAUL MERLON ADD BELOW			THIES
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One int Consumb of Francis On H			
Social Security/Tax ID #	NY) (Last Name First if a Person)		
		•	
STAFFORD, SHERON L.			
1429 KELLEY DR.			
ALABASTER, AL 35007			
	·		
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 ACCEPTANCE CO.,	, INC.		
P.O. BOX 27363			
ST. LOUIS,M O 63141 Social Security/Tax ID #		•	
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Additional secured parties on attached UCC-E	Λ3156Ω	· · · · · · · · · · · · · · · · · · ·	
5. This statement refers to original Financing Statement bearing File No. 021568 SHELBY COUNTY		Data Filled 11/18	₁₀ 88
1 1160 W101		arty, bearing file number shown above, is still effective.	
7. 🔀 Termination. Secured Party no longer claim	ns a security interest under the financing statemer	nt bearing the file number shown above.	
	der the financing statement bearing file number shor to all of the property listed on this file, is assign		
Assignment. whose name and address app 9. Amendment Financing statement bearing fi	pears in item 4. file number shown above is amended as set forth.	in item 11.	
	pliateral described in item 11 from the financing st		
11.		······································	
008 555813			11A. Enter Code(s) From
			Back of Form That Best Describes The Collateral Covered
		- ₹	By This Filing: 6 0 0 6 0 2
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Object Vision of Page 1 and 1		<i>f</i> 1	
Check X if covered: Products of Collateral are	e also covered.		
Signaturals) of Balting in		Cladure Jen	1
Signature(s) of Debtor(s)		Signature(s) of Secured Party(les)	
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies) CITICORP ACCEPTANCE CO	INC.
Type Name of Individual or Business		Type Name of Individual or Business	## T