Release number shown above.		INC. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: 6 0 0 6 0 2
The content of Collateral are also covered. Check X if covered: Products of Collateral are also covered. Signature(s) of Debtor(s) Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Signature(s) of Secured Party(les) CITICORP ACCEPTANCE CO.,	Back of Form That Best Describes The Collateral Covered By This Filling: 6 0 0 6 0 2
Release number shown above. 11. OOS 566968 Check X if covered: Products of Collateral are also covered. Signature(s) of Debtor(s)	, / / /	Back of Form That Best Describes The Collateral Covered By This Filling:
1. O08 566968 Check X if covered: Products of Collateral are also covered.	Classification of Sectored Particles)	Back of Form That Best Describes The Collateral Covered By This Filling:
Release number shown above. O08 566968		Back of Form That Best Describes The Collateral Covered By This Filling:
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Release number shown above.		448 Balan Carleto Proces
Release number shown above.	•	
Full property described in item 11 or to all of the property listed on this file, is assignment. Whose name and address appears in item 4. I Amendment Financing statement bearing file number shown above is amended as set fort. Partial Secured Party releases the collateral described in item 11 from the financing.	th in item 11.	
7. Termination. Secured Party no longer claims a security interest under the financing statem. 3. Partial or The Secured Party's right under the financing statement bearing file number:	shown above to the	
S. Continuation. The original financing statement between the foregoing Debtor and Secured I	Party, bearing file number shown above, is still effective.	
This statement refers to original Financing Statement bearing File No. <u>021834</u> Filed with SHELBY COUNTY	Date Filed12/281	₉ 88
Additional secured parties on attached UCC-E		······································
Social Security/Tax ID #		
ALLWIN, MO 63011-2297		
5851 CLAYTON RD.		
ITICORP ACCEPTANCE CO., INC.		
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)
Additional debtors on attached UCC-E		
Social Security/Tax ID #	FILED WITH:	
LABASTER, AL 35007		
COST, ELENA MARIE Rt. 4 box 1217-a		•
Social Security/Tax ID #	_	wing
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		# CHE
ADD BELOW		* 75 8 8
COST, ALAN HOPE	1	april (37)
Name and Address of Debtor (Last Name First if a Person)	(
TIG-DAID ACCI. 7		
Pre-paid Acct. #		E PER SE
Pre-paid Acct. #	1	ين ألفا خود
		. 👄
CITICORP ACCEPTANCE CO., INC. ADD BELOW Pre-paid Acct. #		.

filing pursuant to the Uniform Commercial Code.

as defined in ALA CODE 7-9-105(n).

Sheets Presented: