

**Important: Read Instructions on Back Before Filling out Form.**

REORDER FROM  
**Registré, Inc.**  
514 PIERCE ST.  
P.O. BOX 218  
ANOKA, MN, 55303  
(612) 421-1713

The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).					
No. of Additional Sheets Presented:					
This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.					
Return copy or recorded original to					
CITICORP NATIONAL SERVICES, INC formerly known as; CITICORP ACCEPTANCE CO, INC PO BOX 790142 ST.LOUIS, MO 63179					
Pre-paid Acct. # _____  	008-594176				
Name and Address of Debtor (Last Name First if a Person)					
BRASHER, NELLIE RUTH 98 COUNTY ROAD 61 NORTH WILSONVILLE, AL 35186					
Social Security / Tax ID # _____					
NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) (IF ANY) (Last Name First if a Person)					
CITICORP NATIONAL SERVICES, INC formerly known as; CITICORP ACCEPTANCE CO, INC PO BOX 790142 ST.LOUIS, MO 63179 Social Security / Tax ID # _____					
Additional secured parties on attached UCC-E					
This statement refers to original Financing Statement bearing File No. _____ Filed with SHELBY Date Filed 10-17-88					
Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. Partial or Full Assignment. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4. Amendment. Financing statement bearing file number shown above is amended as set forth in item 11. Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.					

11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

602

Check X if covered: ☐ Products of Collateral are also covered.

CITICORP NATIONAL SERVICES

Signature(s) of Debtor(s)

Signature(s) of Secured Party(ies)

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Signature(s) of Secured Party(ies)

Type Name of Individual or Business

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

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3  
Approved by The Secretary of State of Alabama