## STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC.

## Important: Read Instructions on Back Before Filling out Form

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☐ 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 filing pursuant to the Uniform Commercial C	to a Filing Officer for Code. 編編
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Ford Consumer Finance Co., Inc. P.O.Box 22008 Tampa, F1 33622-2008			
Pre-paid Acct. #			FRITE LED
Social Security/Tax ID #	(Last Name First if a Person)		Inst * 1993 0892646 CE
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 A	(Last Name First if a Person)
Meritor Credit Corporation P O Box 17128 Pensacola, FL 32522  Social Security/Tax ID #		Ford Consumer Finance Co., Inc. P O Box 22008 Tampa, FL 33622-2008 Successor in Buy Out	
☐ Additional secured parties on attached UCC-E		Juccessor III Day	out
5 XX This statement refers to original Financing State  Shelby County	ement bearing File No. 022423	Date Filed March 15	19 89
6. Continuation. The original financing statement of the Secured Party no longer claims at the Secured Party's right under the Secured Party described in item 11 or the Secured Party releases the collate Release number shown above.	the financing statement bearing file number sto all of the property listed on this file, is assigns in item 4.  number shown above is amended as set fortheral described in item 11 from the financing statements.	shown above to the gned to the assignee to in item 11.	
1989 Cavalier S/N 8296A	·&B		11A Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:  6 0 2
			<del></del>
Check X if covered:   Products of Collateral are a	lso covered.		
		Food Consumer Finance	Co. Inc
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	20., 1110.
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies)	FACT -
aignature(s) of Debtor(s) (necessary only if item s	э із аррисавіє)		<u></u>
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		Type Name of Individual or Business  STANDARD FORM —  (5) FILE COPY DEBTOR(S)  Approve	UNIFORM COMMERCIAL CODE — FORM UCC-3 by The Secretary of State of Alabama