STATE OF ALABAMA — UNIFORM COMMERCIAL CODE
- STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

Important: Read Instructions or	Back Before Filling	g 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 presenting pursuant to the Uniform Commercial	nted to a Filing Officer for all Code
Return copy or recorded original to	Original Properties	THIS SPACE FOR USE OF FILING OFFICER	
		Date, Time, Number & Filing Office	
CLAY, HOMER L			
231 JENKINS CIRCLE			
HELENA, AL 35080			
MEDERNI, ME 33000			e de la companya de
			שו שו מס
Pre-paid Acct. #	(i and blacks Signt if a Boroca)		
2. Name and Address of Debtor	(Last Name First if a Person)		
SAME AS ABOVE			
			の記憶
			A QUE
Social Security/Tax ID #		_]	
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		Ũ ∰
CLAY, JUNE			
SAME		•	<u>د</u>
Social Security/Tax ID #		FILED WITH:	
☐ Additional debtors on attached UCC-E			
3. NAME AND ADDRESS OF SECURED PARTY) (Las	at Name First If a Person)	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)
	SERVICES, INC		
formerly known as:	- 00 - 740		
CITICORP ACCEPTANCE	s CO., INC.		
P.O. BOX 790142	70	()	
ST. LOUIS, MO 631' Social Security/Tax ID #			
Additional secured parties on attached UCC-E			
5. X This statement refers to original Financing State	ment bearing File No		·
Filed with SHELBY COL		Date Filed 8/29	19 83
6. Continuation. The original financing statement to			tive.
7. XXTermination. Secured Party no longer claims a 8. Partial or The Secured Party's right under t	security interest under the financing statement bearing file number t		
☐ Full property described in item 11 or t	o all of the property listed on this file, is assig		
Assignment. whose name and address appear 9. Amendment Financing statement bearing file r	s in item 4. tumber shown above is amended as set forti	h in item 11.	
10. Partial Secured Party releases the collete	eral described in item 11 from the financing		
Release number shown above.			
			11A. Enter Code(s) From
008 540492			Back of Form That Best Describes The
000 J70772			Collateral Covered By This Filling:
			600 602
		•	
/ Abanda Walanana	** ****	à .	
Check X if covered: Products of Collateral are at	SO COVERED.		
	· 	Madue	γ
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	7/
Signature(s) of Debtor(s) (necessary only if item 9	is applicable)	Signature(s) of Secured Party(ies) CITICORP NATIONAL SI	ERVICES INC
Type Name of Individual or Business		Type Name of Individual or Business	
(1) FILING OFFICER COPY - ALPHABETICAL (3) FILING	OFFICER COPY-ACKNOWLEDGEMENT OPY - SECURED	STANDARD FOR	M — UNIFORM COMMERCIAL CODE — FORM UCC-3 roved by The Secretary of State of Alabama