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

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM

Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

The Debtor is a transmitting ut as defined in ALA CODE 7-9-	No. of Additional 105(n). No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing Offiting pursuant to the Uniform Commercial Code.	cer for
Return copy or recorded orig	10000	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
CITICORP NATION	IAL SERVICES, INC		
formerly known	as: CITICORP ACCEPTANCE CO, INC	m ·	Ci Chilina
PO BOX 790142		ği	ST THE
ST.LOUIS.MO 631	179	S C	
Pre-paid Acct. #			新田 灣
2. Name and Address of Debto		Q,	
WHITE, CHERYL A	^\ •		大を
_	AL 35078	*	• . C
MARI CROTTELL		شهد عن	12/3 11:25 1
		C C	
Social Security/Tax ID #	a the Bound		
2A. Name and Address of Debto			
	. & WILSON, NELLIE		
SAME AS ABOVE			
		,	
		FILED WITH:	J
Sociat Security/Tax ID #			
Additional debtors on attache		4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
	SECURED PARTY) (Last Name First if a Person)	4. ASSIGNED OF SECONICO TARRET	,
CITICORP NATIO	NAL SERVICES, INC		
	as; CITICORP ACCEPTANCE CO, INC		
PO BOX 790142 ST.LOUIS,MO 63	170		
Social Security/Tax ID #			
Additional secured parties o	n attached UCC-E		
		<u> </u>	
	original Financing Statement bearing File No022350	Date Filed 3-6-8919	<u> </u>
Filed withSHE	nal financing statement between the foregoing Debtor and Secured	<u></u>	
7. Termination. Secured 1	Party no longer claims a security interest under the financing statem	ent bearing the file number shown above.	
8. Partial or 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			
Assignment, whose ha	ime and address appears in item 4. I statement bearing file number shown above is amended as set fort	h in item 11.	
10. Partial Secured	Party releases the collateral described in item 11 from the financing	statement bearing file	
Release number s	hown above.		· · · · · · · · · · · · · · · · · · ·
008 506279		11	A. Enter Code(s) From Back of Form That
000 700273			Best Describes The Collateral Covered
			By This Filing: 602
Check X if covered: Pro	ducts of Collateral are also covered.		
		CITICORP NATIONAL SERVICES	, INC
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(res)	<u> </u>
		Type Name of Individual or Business	
Type Name of Individual (1) FILING OFFICER COPY - ALPHAI		STANDARD FORM UNIFORM CO	MMERCIAL CODE — FORM UCC-

(2) FILING OFFICER COPY - NUMERICAL