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

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	No. of Additional Sheets Presented:	This	FINANCING STATEMENT g pursuant to the Uniform (is presented to a Fil commercial Code.	ing Officer for	
as defined in ALA CODE 7-9-105(n). Return copy or recorded original to	Sneets Presented.	THIS SPACE	FOR USE OF FILING OFF lumber & Filing Office			
Citicorp National formerly known as: Citicorp Acceptanc P.O.Box 419063 St. Louis, MO 6314	e Co., INC	Date, Time, N	AGINDER OF MING			
Pre-paid Acct. #				₩	4	
2. Name and Address of Debtor	(Last Name First if a Person	n)			}	
Jones, Adlene Glas Rt 2 Box 287C Montevalla, AL 351		- -		* 1994-3		DB/1994-3 DB/1994-3 DB/N/JEE
Social Security/Tax ID #	ANY) (Last Name First if a Perso			ب		10/3 10/3 10/3 10/3 10/3 10/3 10/3 10/3
Jones, Jack B. same				70°		
Social Security/Tax ID #		FILED WITH	<u> </u>	<u></u>	<u></u> .	-
Additional debtors on attached UCC-E						
3. NAME AND ADDRESS OF SECURED PART	Y) (Last Name First if a Person)	4. ASSIGN	EE OF SECURED PARTY	(IF ANY)	(Last Name	First if a Person)
Citicorp National formerly known as: Citicorp Acceptance P.O.Box 419063 StansLapping MO 6314	ce Co.,INC					
☐ Additional secured parties on attached UCC-E	<u> </u>					
5. This statement refers to original Financing Statement bearing File No. 06635						
Filed withShe	<u> </u>		Date i lied	<u>6/13 </u>	_ 19 <u>83</u>	
8. Partial or The Secured Party's right of Pull property described in item Assignment whose name and address a Amendment Financing statement bearing.	aims a security interest under the financing st under the financing statement bearing file num 11 or to all of the property listed on this file, is	tatement bearing the inber shown above to assigned to the assi	signee	s still ellective.		
008-537332					Best Des	Form That cribes The Il Covered Filing:
	ol are also covered				— — — — — —	
Check X if covered: Products of Collatera Signature(s) of Debtor(s)	I DIO DIO COTOLO		Signature(s) of Secured a	nty(ies) PUL	hes)	
Signature(s) of Debtor(s) (necessary only i		Signature(s) of Secured Pa Citicorp N	nty(les)	Service		
Type Name of Individual or Business			Type Name of Individual or	Business		
(1) FILING OFFICER COPY - ALPHABETICAL (3	3) FILING OFFICER COPY-ACKNOWLEDGEMENT 4) FILE COPY - SECURED	(5) FILE COP	STA Y DEBTOR(S)	NDARD FORM — UNII Approved by	FORM COMMERCIAL The Secretary of State	CODE — FORM UCC-3 of Alabama