

67862
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
Register, Inc.
514 PIERCE ST.
P.O. BOX 218
ANDKA, MN 55903
(612) 421-2713

<input type="checkbox"/> 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.
1. Return copy or recorded original to CITICORP NATIONAL SERVICES., INC. formerly known as: CITICORP ACCEPTANCE CO., INC. 15851 CLAYTON RD. ST. LOUIS, MO 630112297		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
Pre-paid Acct. # _____		
2. Name and Address of Debtor (Last Name First if a Person) ECHOLS, BILL F. P.O. BOX 210335 MONTGOMERY, AL 36121-0335		
Social Security/Tax ID # _____		
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) ECHOLS, MARCELL M. SAME		FILED WITH:
Social Security/Tax ID # _____		
<input type="checkbox"/> Additional debtors on attached UCC-E		
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) CITICORP NATIONAL SERVICES., INC. formerly known as: CITICORP ACCEPTANCE CO., INC. 15851 CLAYTON RD. ST. LOUIS, MO 630112297 Social Security/Tax ID # _____		
<input type="checkbox"/> Additional secured parties on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
5. <input checked="" type="checkbox"/> This statement refers to original Financing Statement bearing File No. 012644 Filed with SHELBY COUNTY		Date Filed 9/9 19 85
6. <input checked="" type="checkbox"/> Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.		
7. <input type="checkbox"/> Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.		
8. <input type="checkbox"/> 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.		
9. <input type="checkbox"/> Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.		
10. <input type="checkbox"/> Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.		
11.		

1995-11654
05/04/1995-11654
10:51 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
001 SNA 16:00

016 582411

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

6 0 0 6 0 2

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

Signature(s) of Debtor(s)

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

Type Name of Individual or Business

Signature(s) of Secured Party(ies)

Signature(s) of Secured Party(ies)

CITICORP NATIONAL SERVICES., INC.

Type Name of Individual or Business