## 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.

RECRDER FROM
Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55203
(612) 42141713

The Debter is a transmitting utility	No. of Additional	This FINANCING STATEMENT is presented to a	Filing Officer for
The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	Sheets Presented:	filing pursuant to the Uniform Commercial Code.  THIS SPACE FOR USE OF FILING OFFICER	· · · · · · · · · · · · · · · · · · ·
1. Return copy or recorded original to CITICORP NATIONAL SERVICES., INC.		Date, Time, Number & Filing Office	
formerly known as:			
CITICORP ACCEPTANCE CO., INC.			
15851 CLAYTON RD.			374 
ST. LOUIS, MO 630112297			
Pre-paid Acct. #			
E. Hame and Address of Doblor	(2001)		
AAAK LIMMV M			
COOK, JIMMY W. 2200 CO RD 61 N			THE 18 18
WILSONVILLE, AL 35186-9727			. <u></u> 1 OZ
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Social Security/Tax ID #	(Last Name First if a Person)	-	# 7 E E E
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COOK, NORA			H DI
SAME			
Conint Security / Tay ID #		FILED WITH:	
Social Security/Tax ID #	<del></del>	7	
Additional debtors on attached UCC-E 3. NAME AND ADDRESS OF SECURED PARTY) (Last N	ame First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
CITICORP NATIONAL SERVICE			
formerly known as:	•		
CITICORP ACCEPTANCE CO.,	INC.		
15851 CLAYTON RD.			
STORING MO 630112297			
☐ Additional secured parties on attached UCC-E			
5. This statement refers to original Financing Stateme	ent bearing File No01	3388	
Filed with SHELBY COUNTY	······································	Date Filed12/19	85
☐ Full property described in item 11 or to a Assignment whose name and address appears if 9. ☐ Amendment Financing statement bearing file nur	ecurity interest under the financing stater financing statement bearing file number all of the property listed on this file, is ass	nent bearing the file number shown above. shown above to the igned to the assignee the in item 11.	
11. 008 560979	•	- <del>/ 1</del>	
000 200272	•	•	11A. Enter Code(s) From Back of Form That Best Describes The
	•	•	Best Describes The Collateral Covered By This Filing:
	•	•	<u>600</u> <u>602</u>
	•	•	
•	•		<u> </u>
	• ,	<b>L</b>	<del></del>
Charle V is assumed.   Dendusts of California are also	COVETED	·	
Check X if covered: Products of Collateral are also covered.			
Pinger and at Pinker and		Signature(s) of Secured Party(tes)	
Signature(s) of Debtor(s)			
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies) CITICORP NATIONAL SERVICES, INC.	
Type Name of Individual or Business		Type Name of Individual or Business	IEORM COMMERCIAL CODE — FORM UCC-3