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.

Registre, Inc. 514 PERCE ST. P.O. BOX 218 ANOKA, MN. 55303

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.
Return copy or recorded original to CITICORP NATIONAL	SERVICES., INC.	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
formerly known as:		
CITICORP ACCEPTANO		
15851 CLAYTON RD.		
ST. LOUIS, MO 63011		
D1. 10010, 110 001	- 	No. 2 E S
Pre-paid Acct. #		
Name and Address of Debtor	(Last Name First if a Person)	ម្នាល់ ម៉ា
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MCKENZIE, DOUGLAS		サーゼ 天 美皇
P.O. BOX 57		
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Social Security/Tax ID #	Y) (Last Name First if a Person)	
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MCKENZIE, MARGARE'	${f T}$	
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Social Security/Tax ID #		FILED WITH:
☐ Additional debtors on attached UCC-E		
3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
CITICORP NATIONAL		4. Additional design of the state of the sta
formerly known as		
CITICORP ACCEPTAN		
15851 CLAYTON RD.		
ST LOUIS, MO 63	011	
Additional secured parties on attached UCC-E		
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5. This statement refers to original Financing Statement bearing File No. <u>013706</u>		2/19 86
Filed with SHELBY COUNTY		Date Filed: 2/18 1986_
 7. Termination. Secured Party no longer claims 8. Partial or The Secured Party's right under property described in item 11 or Assignment. Whose name and address appears 9. Amendment Financing statement bearing file 	a security interest under the financing statement r the financing statement bearing file number s r to all of the property listed on this file, is assig	shown above to the gned to the assignee h in item 11.
11.	•	≠ √
008 530030	,	11A. Enter Code(s) From
		Back of Form That Best Describes The
		Collateral Covered By This Filing:
	•	600 602
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Check X if covered: Products of Collateral are	also covered.	
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Signature(s) of Debtor(s)	<u> </u>	Signature(s) of Secured Party(ies)
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Signature(s) of Debtor(s) (necessary only if item	s is applicable)	Signature(s) of Secured Party(ies) CITICORP NATIONAL SERVICES, INC.
Type Name of Individual or Business.		Type Name of Individual or Business