

1. Return copy or recorded original to

CITICORP NATIONAL SERVICES, INC.
formerly known as:
CITICORP ACCEPTANCE COMPANY, INC.
15851 CLAYTON ROAD
ST. LOUIS, MO 63011

Pre-paid Acct. #

2. Name and Address of Debtor

(Last Name First if a Person)

RICE, RONNIE L.
RR1 P. O. BOX 376-A
CALERA, AL 35040-9758

Social Security/Tax ID #

2A. Name and Address of Debtor

(IF ANY)

(Last Name First if a Person)

RICE, PAULA K.
SAME

Social Security/Tax ID #

☐ 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 COMPANY, INC.
15851 CLAYTON ROAD
ST. LOUIS, MO 63011

Social Security/Tax ID #

☐ Additional secured parties on attached UCC-E

5. ☒ This statement refers to original Financing Statement bearing File No. **014406**

Filed with

SHELBY

Date Filed **5/23**

19**86**

6. ☒ Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.

7. ☐ Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above

8. ☐ Partial or ☐ Full. 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 name and address appears in item 4.

9. ☐ Amendment. Financing statement bearing file number shown above is amended as set forth in item 11

10. ☐ Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11.

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

800 602

008-531418

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)

CITICORP NATIONAL SERVICES

Type Name of Individual or Business

(1) FILING OFFICER COPY - ALPHABETICAL
(2) FILING OFFICER COPY - NUMERICAL

(3) FILING OFFICER COPY - ACKNOWLEDGEMENT
(4) FILE COPY - SECURED

(5) FILE COPY DEBTOR(S)

STANDARD FORM -- UNIFORM COMMERCIAL CODE -- FORM UCC-3
Approved by The Secretary of State of Alabama