Return copy or recorded original to	THIS SPACE FOR USE OF FILING OFFICER  Date, Time, Number & Filing Office
CITICORP NATIONAL SERVICES, INC.	
formerly known as:	Γ~- 
CITICORP ACCEPTANCE COMPANY, INC.	
15851 CLAYTON ROAD	<b>\$</b>
ST. LOUIS, MO 63011	<b>9</b>
Name and Address of Debtor  (Last Name First if a Person)	- 
PORCH, TONY T.	
ROUTE 2 BOX 262-C	
VINCENT, AL 35178	# 二二年 8
Social Security/Tax ID #	
•	TEE TO THE PROPERTY OF THE PRO
PORCH, SANDRA A.	7.3 %
SAME	<b>大声</b>
	12 (d 
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) CITICORP NATIONAL SERVICES, INC., FOR BELLY KNOWN AS:	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
CITICORP ACCEPTANCE COMPANY, INC.	
15851 CLAYTON ROAD	
ST. LOUIS, NO 63011	
Social Security/Tax tD #	
☐ Additional secured parties on attached UCC-E	
5. ☐ This statement refers to original Financing Statement bearing File No	•
Filed withSHELBY COUNTY	Date Filed 01/09 19_89
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 statem. 8. Partial or The Secured Party's right under the financing statement bearing file number.	shown above to the
Full property described in item 11 or to all of the property listed on this file, is assi Assignment, whose name and address appears in item 4.	gned to the assignee
9. Amendment Financing statement bearing file number shown above is amended as set for 10. Partial Secured Party releases the collateral described in item 11 from the financing	th in item 11. statement bearing file
Release number shown above.	
11.	11A. Enter Code(s) From
	Back of Form That Best Describes The
	Collateral Covered  By This Filling:
016-534610	600 <del>-60</del> 2
	.—————————————————————————————————————
•	
Check X if covered: Products of Collateral are also covered.	
Signature(s) of Debtor(s)	Signaturies Secured Partyling
<u> </u>	Meny schuerlecker
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Signature(s) of Secured Party(les)  CITICORP NATIONAL SERVICES, INC.
Type Name of Individual or Business	Type Name of Individual or Business STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3
(1) FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY-ACKNOWLEDGEMENT (2) FILING OFFICER COPY - NUMERICAL (4) FILE COPY - SECURED	(5) FILE COPY DEBTOR(S)  STANDARD FORM — Unit-Oran Commercial Code — Form 500.3  Approved by The Secretary of State of Alabama

filing pursuant to the Uniform Commercial Code.

as defined in ALA CODE 7-9-105(n).

Sheets Presented: