

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

THIS SPACE FOR USE OF FILING OFFICER  
Date, Time, Number & Filing Office

2. Name and Address of Debtor

(Last Name First if a Person)

CARTER, JERRY  
P. O. BOX 600  
COLUMBIANA, AL 35051

Social Security/Tax ID #

2A. Name and Address of Debtor

(IF ANY)

(Last Name First if a Person)

CARTER, KATHY  
N/A

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

Social Security/Tax ID #

4. ASSIGNEE OF SECURED PARTY

(IF ANY)

(Last Name First if a Person)

☐ Additional secured parties on attached UCC-E

1993-

5. ☐ This statement refers to original Financing Statement bearing File No.

019782 - 04532

Filed with SHELBY COUNTY

Date Filed 04/12/88 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:

008-587212

- 600 602 -

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

Signature(s) of Debtor(s)

Signature(s) of Secured Party(ies)

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

Signature(s) of Secured Party(ies)

Type Name of Individual or Business

CITICORP NATIONAL SERVICES, INC.

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