

<input type="checkbox"/> 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.	
1. Return copy or recorded original to CITICORP NATIONAL SERVICES, INC. FKA: CITICORP ACCEPTANCE COMPANY, INC. 15851 CLAYTON ROAD ST. LOUIS, MO 63011 Pre-paid Acct. #			THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
2. Name and Address of Debtor (Last Name First if a Person) BALLARD, ROBIN K. 918 HIGHWAY 331 COLUMBIANA, AL 35051 Social Security/Tax ID #			Inst # 1997-07378 03/10/1997-07378 01:13 PM CERTIFIED JUDGE OF PROBATE SHELBY COUNTY, AL	
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) BALLARD, MYRA SAME Social Security/Tax ID #				
<input type="checkbox"/> 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)	
<input type="checkbox"/> Additional secured parties on attached UCC-E				
5. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No 023998 Filed with SHELBY COUNTY			Date Filed OCTOBER 10, 19 89	
6. <input type="checkbox"/> Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7. <input checked="" type="checkbox"/> Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. 8. <input type="checkbox"/> Partial or <input type="checkbox"/> Full Assignment. 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 whose name and address appears in item 4. 9. <input type="checkbox"/> Amendment. Financing statement bearing file number shown above is amended as set forth in item 11. 10. <input type="checkbox"/> Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above. 11.				
008-578906			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: 600 502	
Check X if covered: <input type="checkbox"/> 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	