

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 # _____
2. Name and Address of Debtor (Last Name First if a Person)
WALLACE, JOHN W.
ROUTE 1 BOX 350 LOT 73
PELHAM, AL 35124

Social Security/Tax ID # _____
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)
WALLACE, DEBRA
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

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

4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

5. ☐ This statement refers to original Financing Statement bearing File No. **1993-18080**
Filed with **SHELBY COUNTY** Date Filed **JUNE 21, 1993** 19__

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 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. _____
008-594242
11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
600-602
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) **John Wallace**
Signature(s) of Secured Party(ies) **CITICORP NATIONAL SERVICES, INC.**
Type Name of Individual or Business _____