STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

Important: Read Instructions on Back Before Filling out Form. 32510

REORDER FROM

Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

☐ 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.		
Return copy or recorded original to	!	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		
NationsCredit DISTR 1000 HOLCOMS WO SUITE 240	BUTION FINANCÉ, INC. 1000 FARICUAY			
FRUSWELL CZOGI.	A 194 6	·	96	96. 7.18
Pre-paid Acct.#	· · · · · · · · · · · · · · · · · · ·			0 H & 8
Name and Address of Debtor Clinkscales, Michael D 3760 Highway 57 Vincent, AL 35178	(Last Name First if a Person)		-856T * *	108/11998-1 08 FM CFR 187 CORNY 31866 G
Social Security/Tex ID #			16	迎 共 湯
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		. .	□ (U • · · · · · · · · · · · · · · · · · ·
Clinkscales, Tammy S Same as above			•	
		<u>.</u>		
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)	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (I	Last Name First if a Person)
NationsCredit Commercial 1000 Holcomb Woods PKWY Roswell, GA 30076	•	• • • • • • • • • • • • • • • • • • •	•	
Social Security/Tax ID #				
Additional secured parties on attached UCC-E				
				
5. This statement refers to original Financing Statem	ent bearing File No. <u>1994–1858(</u>	Date Filed Ω6 + ΩΩ-		— ∩ <i>₫</i>
Full property described in item 11 or to Assignment, whose name and address appears 9. Amendment Financing statement bearing file not secured Party releases the collater number shown above.	security interest under the financing statemer e financing statement bearing file number sh all of the property listed on this file, is assign	irty, bearing file number shown above, is still at bearing the file number shown above own above to the ed to the assignee in item 11.		
11.				F-4 O-4-(-) F
C44087574-809 03-25-98				Enter Code(s) From Back of Form That Best Describes The Colleteral Covered By This Filling:
		•		
\$				
Check X if covered: Products of Collateral are also	o covered.	•	_	
· · · · · · · · · · · · · · · · · · ·	-	$\Lambda_{\Lambda} \cap \cap \cap \cap \Lambda$	200011	100 010
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	L oug C	MAN ACTO
Signature(s) of Debtor(s) (necessary only if item 9 i	Signature(s) of Secured Party(ies) NationsCredit Commercial Corp.			
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (3) FILING O	OFFICER COPY-ACKNOWLEDGEMENT	Type Name of Individual or Busine STANDARD		MERCIAL CODE — FORM UCC-3