

03-16-1999



100985634

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

38-99

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type		Conveyance Type	
<input checked="" type="checkbox"/> New		<input type="checkbox"/> Assignment	<input type="checkbox"/> License
<input type="checkbox"/> Resubmission (Non-Recordation) Document ID # <input type="text"/>		<input type="checkbox"/> Security Agreement	<input type="checkbox"/> Nunc Pro Tunc Assignment
<input type="checkbox"/> Correction of PTO Error Reel # <input type="text"/> Frame # <input type="text"/>		<input type="checkbox"/> Merger	Effective Date Month Day Year <input type="text"/>
<input type="checkbox"/> Corrective Document Reel # <input type="text"/> Frame # <input type="text"/>		<input type="checkbox"/> Change of Name	
		<input checked="" type="checkbox"/> Other	<input type="text"/> Release of Security Interests and Liens

Conveying Party Mark if additional names of conveying parties attached

Name Star Bank, National Association Execution Date
Month Day Year
 08251998

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization An Ohio Corporation

Receiving Mark if additional names of receiving parties

Name Alrenco, Inc.

DBA/AKA/TA

Composed of

Address (line 1) 1736 E. Main Street

Address (line 2)

Address (line 3) New Albany IN 47150
City State/Country Zip Code

Individual General Partnership Limited Partnership If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

Corporation Association

Other

Citizenship/State of Incorporation/Organization An Indiana Corporation

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

REEL: 1867 FRAME: 0750

TRADEMARK

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages Enter the total number of pages of the attached conveyance document including any attachments. #

Trademark Application Number(s) or Registration Number(s) Mark if additional numbers attached
 Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)			Registration Number(s)		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1607835"/>	<input type="text" value="1829703"/>	<input type="text" value="1336087"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of Properties Enter the total number of properties involved. #

Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed Deposit Account

Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.)
 Deposit Account Number: #

Authorization to charge additional fees: Yes No

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Susan M. Kornfield Susan M Kornfield 3-4-99
 Name of Person Signing Signature Date Signed

February 25, 1998

Alrenco, Inc.
1736 E. Main Street
New Albany, Indiana 47150


RE: Alrenco, Inc.

Ladies and Gentlemen:

The undersigned on behalf of Star Bank, National Association ("Star") confirms that as of the date hereof, Alrenco, Inc. (the "Company") has no obligations outstanding to Star, that the Company has terminated any credit facilities previously entered into with Star and that as of the date hereof, the Company has no outstanding credit facilities with Star. The undersigned further confirms that any letters of credit issued by or on behalf of Star prior to the date hereof with respect to which the Company is or was obligated, have been released and canceled.

Star further acknowledges that, in accordance with the payoff letter issued to the Company and Bank One, Kentucky, N.A., dated July 31, 1997 (a copy of which is attached hereto) Star has released its security interests and liens in or upon any property of the Company and agrees to execute and deliver all discharges of lien and terminations of financing statements necessary to evidence the termination and release of its liens and security interests, as aforesaid, provided, that all such instruments of discharge and termination statements shall be prepared by or at, the direction of the Company.

Very truly yours,



Nick Sypniewski, Vice President
Star Bank
Structured Capital Division
425 Walnut Street, MC9220
Cincinnati, Ohio 45201

LEP/vs

BODMAN, LONGLEY & DAHLING LLP

110 MILLER, SUITE 300
ANN ARBOR, MICHIGAN 48104
(734) 761-3780
FAX (734) 930-2494

SUSAN M. KORNFIELD
DIRECT DIAL (734) 930-2488
SKORNFIELD@BODMANLONGLEY.COM
ALSO ADMITTED IN ILLINOIS

34TH FLOOR
100 RENAISSANCE CENTER
DETROIT, MICHIGAN 48243
(313) 250-7777
FAX (313) 393-7579

229 COURT STREET
P.O. Box 405
CHEBOYGAN, MICHIGAN 49721
(616) 627-4351
FAX (616) 627-2802

755 WEST BIG BEAVER ROAD
SUITE 2020
TROY, MICHIGAN 48064
(248) 362-2110
FAX (248) 244-0780

March 4, 1999

Commissioner of Patents
and Trademarks
Box Assignments
Washington, D.C. 20231

By Certified Mail

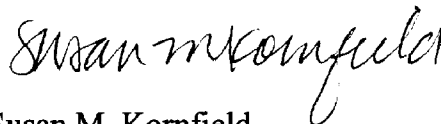
Re: Recordation Form Cover Sheet for the Trademarks:
Reg. No. 1,607,835, "ALRENCO RENT TO OWN FOR THE HOME"
Reg. No. 1,829,703, "ALRENCO RENT TO OWN FOR THE HOME
THE ONLY WAY TO GO (and Design)"
Reg. No. 1,336,087, "ALRENCO, INC."

Enclosed please find:

- (1) the original and two (2) copies of the signed Recordation Form Cover Sheet;
- (2) a copy of the release by Star Bank, National Association in trademarks owned by Alrenco, Inc.; and
- (3) a check in the amount of \$90.00 made payable to "Commissioner of Patents and Trademarks" in payment of the filing fee.

Please contact me if further information is required. Thank you.

Sincerely,



Susan M. Kornfield

Enclosures

cc: Laurie E. Phelan (w/ Encl.)
Rachelle P. Tyshka (w/o Encl.)

W:\IP-GROUP\CLIENTS\COMERICA\ALRENCO\2PTOCOV.LTR

TRADEMARK
REEL: 1867 FRAME: 0753

copy

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

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Submission Type

- New
- Resubmission (Non-Recordation)
Document ID #
- Correction of PTO Error
Reel # Frame #
- Corrective Document
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Conveyance Type

- Assignment License
 - Security Agreement Nunc Pro Tunc Assignment
 - Merger Change of Name
 - Other Release of Security Interests and Liens
- Effective Date
Month Day Year

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
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TRADEMARK
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Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

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Yes

No

Statement and Signature

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Susan M. Kornfield

Susan M. Kornfield

3-4-99

Name of Person Signing

Signature

Date Signed