HOC FINANCING	CTATEMEN									
UCC FINANCING FOLLOW INSTRUCTION A NAME & PHONE OF CON	ONS (front and	back) CAREFULLY	′							
A. NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 662-4141										
B. SEND ACKNOWLEDGEM	SEND ACKNOWLEDGEMENT TO: (Name and Address) 12834 SNA			ON CREDIT						
UCC Direct	UCC Direct Services 10485			14						
P.O. Box 296 Glendale, CA	071 A 91209-9071	R	IRI							
					THE ABOVE	SPACE IS FOR FI	LING OFFICE USE ON	LY		
1. DEBTOR'S EXACT FUI		- insert only o <u>ne</u> deb	tor name (1a	or 1b) - do not ab	breviate or combine n	ames				
OR	1740C									
1b. INDIVIDUAL'S LAST NAME AGUIAR				FIRST NAME JOE		MIDDLE	MIDDLE NAME		SUFFIX	
IC. MAILING ADDRESS 26 ABBIT ST				CITY CUMBERLAND		STATE RI	POSTAL CODE 02864	COU	COUNTRY	
1. SEE INSTRUCTIONS ADD'L INFO RE 10. TYPE OF ORGANIZATION ORGANIZATION DEBTOR			ZATION	1f. JURISDICTION OF ORGANIZATION		1g. ORG	1g. ORGANIZATIONAL ID #, if any		NONE	
2. ADDITIONAL DEBTOR		EGAL NAME - insert	only o <u>ne</u> del	btor name (2a or	2b) - do not abbreviate	e or combine na	mes			
2a. ORGANIZATION'S N	IAME									
2b. INDIVIDUAL'S LAST NAME				FIRST NAME		MIDDLE	MIDDLE NAME		IX	
c. MAILING ADDRESS				CITY		STATE	POSTAL CODE	cour	NTRY	
2d. SEE INSTRUCTIONS	ADD'I, INFO RE ORGANIZATION ORGANIZATION OBSTOR			2f. JURISDICTION OF ORGANIZATION		2g. ORG	2g. ORGANIZATIONAL ID #, if any		NONE	
3. SECURED PARTY'S NA	AME (or NAME of	TOTAL ASSIGNEE o	f ASSIGNOR	S/P) - insert only	one_secured party r	name (3a or 3b)				
3a. ORGANIZATION'S N SNAP ON CREI										
R 3b. INDIVIDUAL'S LAST NAME				FIRST NAME		MIDDLE	MIDDLE NAME		IX	
DE: MAILING ADDRESS 950 TECHNOLOGY WAY, SUITE 301				CITY LIBERTYVILLE		STATE IL	POSTAL CODE 60048	COUN	COUNTRY	
. This FINANCING STATEME	NT covers the follow	ring collateral:					<u> </u>			
Purchase Money Securicelow. In addition to the and equipment of Debinanufactured or distributoceeds (including incregoing and the collar Contract No.: 1143097	e purchase mon tor, whether now uted by Snap-o surance proceed teral listed on th	ney security interes w owned or hereaft n Incorporated or a ds or claims), acces	st granted in er acquired any of its af ssions atta	n the collateral , which were a filiates, or bear achments, addi	listed on the reference or refe	enced, the collap-on Dealer, Sun Electric in and replacen	lateral shall includ and any and all go trademarks or log- nents to and of su	e all items oods and e os, togethe ich items (t	of tools equipment of with a	
ALTERNATIVE CONTRACT		7	<u> </u>							
. ALTERNATIVE DESIGNATION TO THE STATE OF TH	EMENT is to be filed	LESSEE/LESSOR	<u> </u>	EE/CONSIGNOR 7. Check to RE	BAILEE/BAILOR QUEST SEARCH REPO	SELLER/BU	,	<u> </u>	C FILING	
ESTATE RECORDS. OPTIONAL FILER REFE	Attach Addendum		lif applicable			[optional]	All Debtors	Debtor 1	Debtor 2	
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