SEND ACKNOWLEDGEMEN	331-3282 Fa	onal) IX: (818) 662-4141					
	AD ACKNOWLEDGEMENT TO: (Name and Address) 12834 SNA		ON CREDIT				
UCC Direct Se	UCC Direct Services 108166		ا 97				
P.O. Box 29071 Glendale, CA 91209-9071		RIRI					
L	01200 0011						
DEBTODIS EYACT EI II I	LEGAL MAME	insert only one debtor name (1a	a or 1b) - do not	· · · · · · · · · · · · · · · · · · ·		LING OFFICE USE ONLY	<u> </u>
1a. ORGANIZATION'S NA		insert only one debtor harne (12	a or 10) - 00 not	aboreviate or combine hame			
15. INDIVIDUAL'S LAST NAME LEIPER			FIRST NAME GARY		MIDDLE NAME		SUFFIX
MAILING ADDRESS 2 HARRIS ST			CITY	KET	STATE RI	POSTAL CODE 02861	COUNTRY
ADD'L INFO RE 1e. TYPE OF ORGANIZATION DEBTOR			1f. JURISDICTION OF ORGANIZATION		1g. ORG	1g. ORGANIZATIONAL ID #, if any	
ADDITIONAL DEBTOR'S		EGAL NAME - insert only one d	ebtor name (2a	or 2b) - do not abbreviate or	combine na	mes	
		•					
26. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE	NAME	SUFFIX
I MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
SEE INSTRUCTIONS	STRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR		2f. JURISDICTION OF ORGANIZATION		2g. ORGANIZATIONAL ID #, if any		y
3a. ORGANIZATION'S NA	ME	TOTAL ASSIGNEE of ASSIGNO	R S/P) - insert o	only o <u>ne</u> secured party nam	e (3a or 3b)		
SNAP ON CREDI					I		
3b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME		SUFFIX
MAILING ADDRESS 50 TECHNOLOGY WAY, SUITE 301			CITY LIBERTYVILLE		STATE IL	POSTAL CODE 60048	COUNTRY
his FINANCING STATEMEN	IT covers the following	ng collateral:					