

UCC FINANCING STATEMENT

REFERENCE NUMBER

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

MARISA BARTO - 800 433 7098

B. SEND ACKNOWLEDGEMENT TO: (Name and Address)

**MATCO TOOLS
4403 ALLEN RD.
STOW, OH 44224**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name(1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S LAST NAME VENDETTOLI		FIRST NAME JOHN	MIDDLE NAME	SUFFIX JR
1c. MAILING ADDRESS 105 MAPLE AV APT. C		CITY W WARWRIC	STATE RI	POSTAL CODE 02893	COUNTRY USA
1d. TAX ID#: SSN or EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION		1g. ORGANIZATIONAL ID#, if any ☒ NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID#: SSN or EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION		2g. ORGANIZATIONAL ID#, if any ☐ NONE

3. SECURED PARTY'S NAME (or name of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME NMTC INC. D/B/A MATCO TOOLS					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 4403 ALLEN RD.		CITY STOW	STATE OH	POSTAL CODE 44224	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

**ALL TOOLS AND EQUIPMENT NOW OWNED BY DEBTOR FOR USE IN DEBTOR'S TRADE
OR BUSINESS TOGETHER WITH ANY AND ALL SIMILAR TOOLS AND EQUIPMENT
HEREAFTER ACQUIRED.**

5. ALTERNATIVE DESIGNATION (if applicable) ☐ LESEE/LESSOR ☐ CONSIGNEE/CONSIGNOR ☐ BAILEE/BAILOR ☐ SELLER/BUYER ☐ AG. LIEN ☐ NON-UCC FILING6. ☐ THIS FINANCING STATEMENT is to be filed (for record (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (Optional) ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2

8. OPTIONAL FILER REFERENCE DATA

N070401426

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