

UCC-1 Form

FILER INFORMATION

Full name: **JO-ANN LAWSON**

Email Contact at Filer: **JLAWSON@BRCSM.COM**

SEND ACKNOWLEDGEMENT TO

Contact name:

Mailing Address: **362 BROADWAY**

City, State Zip Country: **PROVIDENCE, RI 02909 USA**

DEBTOR INFORMATION

Org. Name: **WALCO ELECTRIC COMPANY**

Mailing Address: **303 ALLENS AVENUE**

City, State Zip Country: **PROVIDENCE, RI 02905 USA**

SECURED PARTY INFORMATION

Org. Name: **BRISTOL FUNDING LLC**

Mailing Address: **362 BROADWAY ATTN: THOMAS HEMMENDINGER, ESQ.**

City, State Zip Country: **PROVIDENCE, RI 02909 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 17-0523

COLLATERAL

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