

# UCC-1 Form

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## FILER INFORMATION

*Full name:*

*Email Contact at Filer:* UCC@MATCOTOOLS.COM

## SEND ACKNOWLEDGEMENT TO

*Contact name:* MATCO TOOLS CORPORATION

*Mailing Address:* 4403 ALLEN RD

*City, State Zip Country:* STOW, OH 44224 USA

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## DEBTOR INFORMATION

*Org. Name:* RI TOOLS INC

*Mailing Address:* 5 EQUITY LN

*City, State Zip Country:* WESTERLY, RI 02891 USA

*Last Name (i.e. Family Name or Surname):* BURNS *First Name:* JOHN *Middle Name:* M

*Mailing Address:* 5 EQUITY LN

*City, State Zip Country:* WESTERLY, RI 02891 USA

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## SECURED PARTY INFORMATION

*Org. Name:* MATCO TOOLS CORPORATION

*Mailing Address:* 4403 ALLEN RD

*City, State Zip Country:* STOW, OH 44224 USA

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## TRANSACTION TYPE: STANDARD

**CUSTOMER REFERENCE: 428195**

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## 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.