

UCC-1 Form

FILER INFORMATION

Full name: **DAWN ROUSE**

Email Contact at Filer: **DAWN.ROUSE@GFS.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **GORDON FOOD SERVICE, INC.**

Mailing Address: **PO BOX 2244**

City, State Zip Country: **GRAND RAPIDS, MI 49501 USA**

DEBTOR INFORMATION

Org. Name: **B.A.D.C.G., INC.**

Mailing Address: **PO BOX 697**

City, State Zip Country: **BLOCK ISLAND, RI 02807 USA**

SECURED PARTY INFORMATION

Org. Name: **PERKINS PAPER, LLC**

Mailing Address: **PO BOX 2244**

City, State Zip Country: **GRAND RAPIDS, MI 49501 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 100239458-23

COLLATERAL

ALL ASSETS, WITHOUT LIMITATION, INCLUDING ALL GOODS, EQUIPMENT, INVENTORY, VEHICLES, FIXTURES, WORK IN PROCESS, ACCOUNTS RECEIVABLE, INSTRUMENTS, CHATTEL PAPER, CAUSES OF ACTION, GENERAL INTANGIBLES, INCLUDING ANY LIQUOR LICENSE(S), AND ALL PROCEEDS THEREOF.