

UCC-1 Form

FILER INFORMATION

Full name: **WOLTERS KLUWER LIEN SOLUTIONS**

Email Contact at Filer: **CTLSWEBACK@WOLTERSKLUWER.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **LIEN SOLUTIONS**

Mailing Address: **P.O. Box 29071**

City, State Zip Country: **GLENDALE, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **JAMMAT HOUSING AND COMMUNITY DEVELOPMENT CORPORATION. INC.**

Mailing Address: **801 ELMWOOD AVE**

City, State Zip Country: **PROVIDENCE, RI 02907 USA**

SECURED PARTY INFORMATION

Org. Name: **U.S. BANK EQUIPMENT FINANCE, A DIVISION OF U.S. BANK NATIONAL ASSOCIATION**

Mailing Address: **1310 MADRID STREET**

City, State Zip Country: **MARSHALL, MN 56258 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-76060442-59523840

COLLATERAL

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