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: **W. JAK TRUCKING, LLC.**

Mailing Address: **10 HARRIS DRIFTWAY ST UNIT 1**

City, State Zip Country: **CRANSTON, RI 02920 USA**

SECURED PARTY INFORMATION

Org. Name: **TOYOTA INDUSTRIES COMMERCIAL FINANCE, INC.**

Mailing Address: **P.O. BOX 9050**

City, State Zip Country: **DALLAS, TX 75019-9050 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-77304043-60025675

COLLATERAL

ONE (1) 2017 HINO MODEL # 268 SERIAL # 5PVNJ8JV1H4S62982 BODY: BOX BODY 26x102x103