

UCC-1 Form

FILER INFORMATION

Full name: **FRANCIS A GASCHEN**

Email Contact at Filer: **FRNKLW@AOL.COM**

SEND ACKNOWLEDGEMENT TO

Contact name:

Mailing Address: **POB ONE**

City, State Zip Country: **CUMBERLAND,, RI 02864 USA**

DEBTOR INFORMATION

Org. Name: **THREE WHEEL STUDIO, INC.**

Mailing Address: **66 MILES AVENUE**

City, State Zip Country: **WOONSOCKET, RI 02895 USA**

SECURED PARTY INFORMATION

Org. Name: **US SMALL BUSINESS ADMINISTRATION**

Mailing Address: **2 NORTH 20TH STREET**

City, State Zip Country: **BIRMINGHAM, AL 35203 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RE 2000067734-MOD2

COLLATERAL

SEE ATTACHED