

UCC-1 Form

FILER INFORMATION

Full name: **PAYTON WIK**

Email Contact at Filer: **OPERATIONSSUPPORT@NORTHLANDCAPITAL.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **NORTHLAND CAPITAL FINANCIAL SERVICES, LLC**

Mailing Address: **333 33RD AVE S**

City, State Zip Country: **SAINT CLOUD, MN 56301 USA**

DEBTOR INFORMATION

Org. Name: **WESCOM CONSTRUCTION LLC**

Mailing Address: **16 PECKHAM AVENUE**

City, State Zip Country: **NORTH PROVIDENCE, RI 02908 USA**

SECURED PARTY INFORMATION

Org. Name: **NORTHLAND CAPITAL FINANCIAL SERVICES, LLC**

Mailing Address: **PO Box 7278**

City, State Zip Country: **SAINT CLOUD, MN 56302 USA**

TRANSACTION TYPE: STANDARD

ALTERNATIVE DESIGNATION: SELLER-BUYER

CUSTOMER REFERENCE: C21749-001

COLLATERAL

2011 McCLOSKEY C50 JAW CRUSHER SN: 80134