

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: **SWG PROMOTIONS**

Mailing Address: **6 ROBIN STREET**

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

Last Name (i.e. Family Name or Surname): **GATELY** *First Name:* **JAMES** *Middle Name:* **W**

Mailing Address: **521 ADMIRAL STREET FL 2**

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

SECURED PARTY INFORMATION

Org. Name: **BEACON FUNDING CORPORATION**

Mailing Address: **3400 DUNDEE ROAD SUITE 180**

City, State Zip Country: **NORTHBROOK, IL 60062 USA**

TRANSACTION TYPE: STANDARD

ALTERNATIVE DESIGNATION: LESSEE-LESSOR

CUSTOMER REFERENCE: RI-0-81455161-61758290

COLLATERAL

FOR INFORMATIONAL PURPOSES ONLY - THE EQUIPMENT LISTED BELOW PLUS ALL ADDITIONS, ACCESSIONS, SUBSTITUTIONS, ATTACHMENTS, AND REPLACEMENTS: (1) 2021 WILCOM EMBSTUDIO E4 DECORATING SOFTWARE WITH DONGLE, (1) 2021 BARUDAN BEKY-S1506CII 6 HEAD 15 NEEDLE EMBROIDERY MACHINE SERIAL NUMBER 3131232C21 INCLUDES (12 EACH) 12CM, 15CM, 18CM, 300x290, 330x438 HOOPS, (6) ADVANTAGE EX CAP SYSTEMS WITH (1) DRIVER AND (2) FRAMES; (1) CAP FRAMING DEVICE