# UCC-1 Form

## FILER INFORMATION

*Full name:* **NCS UCC SERVICES GROUP**

*Email Contact at Filer:* **UCC@NCSCREDIT.COM**

## SEND ACKNOWLEDGEMENT TO

*Contact name:* **NCS UCC SERVICES GROUP**

*Mailing Address:* **PO BOX 24101**

*City, State Zip Country:* **CLEVELAND, OH 44124 USA**

## DEBTOR INFORMATION

*Org. Name:* **O.E.S. HOME OF RHODE ISLAND**

*Mailing Address:* **85 ETHAN ST**

*City, State Zip Country:* **WARWICK, RI 02888 USA**

*Org. Name:* **ETHAN PLACE**

*Mailing Address:* **85 ETHAN ST**

*City, State Zip Country:* **WARWICK, RI 02888 USA**

## SECURED PARTY INFORMATION

*Org. Name:* **US FOODS, INC.**

*Mailing Address:* **1051 AMBOY AVENUE**

*City, State Zip Country:* **PERTH AMBOY, NJ 08861 USA**

## TRANSACTION TYPE: STANDARD

## CUSTOMER REFERENCE: NCS UCC #U302599

## COLLATERAL

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