

UCC-1 Form

FILER INFORMATION

Full name: **CAPITOL LIEN RECORDS**

Email Contact at Filer: **FILINGS@CAPITOLLIEN.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **CAPITOL LIEN RECORDS**

Mailing Address: **1010 DALE STREET N**

City, State Zip Country: **ST. PAUL, MN 55117 USA**

DEBTOR INFORMATION

Org. Name: **LORING FINANCIAL PLANNING & INVESTMENTS, INC.**

Mailing Address: **600 PUTNAM PIKE, SUITE #4**

City, State Zip Country: **GREENVILLE, RI 02828 USA**

SECURED PARTY INFORMATION

Org. Name: **ION BANK**

Mailing Address: **87 CHURCH STREET**

City, State Zip Country: **NAUGATUCK, CT 06770 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

ALL ASSETS