

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: **GLENDAL, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **WHITTET-HIGGINS COMPANY**

Mailing Address: **33 HIGGINSON AVENUE**

City, State Zip Country: **CENTRAL FALLS, RI 02863 USA**

Org. Name: **WHITTET-HIGGINS COMPANY WILLIAM COLLINS COMPANY**

Mailing Address: **33 HIGGINSON AVENUE**

City, State Zip Country: **CENTRAL FALLS, RI 02863 USA**

SECURED PARTY INFORMATION

Org. Name: **YAMAZEN, INC.**

Mailing Address: **111 NORTHWEST POINT BLVD.**

City, State Zip Country: **ELK GROVE VILLAGE, IL 60007 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-88220743-64588883

COLLATERAL

ONE (1) TAKISAWA MODEL TS-4000YS CNC LATHE PKG. S/N TJBT0304 INCLUDING ALL STANDARD ATTACHMENTS AND ACCESSORIES PER PURCHASE ORDER AND INVOICE. LOCATION OF COLLATERAL: WHITTET-HIGGINS COMPANY WILLIAM COLLINS COMPANY 33 HIGGINSON AVENUE CENTRAL FALLS RI 02863