

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: **NE PROPERTY SERVICES, INC.**

Mailing Address: **3 BETSY DR**

City, State Zip Country: **BRISTOL, RI 02809 USA**

SECURED PARTY INFORMATION

Org. Name: **DAIMLER TRUCK FINANCIAL SERVICES USA LLC**

Mailing Address: **14372 HERITAGE PARKWAY, SUITE 400**

City, State Zip Country: **FORT WORTH, TX 76177 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-88805618-64841998

COLLATERAL

THE FOLLOWING DESCRIBED EQUIPMENT, TOGETHER WITH ALL PROCEEDS OF SUCH EQUIPMENT, INCLUDING, WITHOUT LIMITATION, ALL ACCOUNTS, GENERAL INTANGIBLES, PAYMENT INTANGIBLES, TANGIBLE CHATTEL PAPER, ELECTRONIC CHATTEL PAPER, SUPPORTING OBLIGATIONS, DOCUMENTS AND INSURANCE PROCEEDS ARISING FROM OR RELATING TO THE SALE OR DISPOSITION OF SUCH EQUIPMENT, AS PROVIDED FOR WITHIN THE SCOPE OF ARTICLE 9: 2022 BIBEAU DUMP BODY S/N 326631