

# UCC-3 Form - CONTINUATION

*Original File Number:* **200806979810**

---

## FILER INFORMATION

*Full name:* **DAVID CARREIRO**

*Email Contact at Filer:* **DAVID.CARREIROJR@BANKFIVE.COM**

## SEND ACKNOWLEDGEMENT TO

*Contact name:* **BANKFIVE**

*Mailing Address:* **79 NORTH MAIN ST**

*City, State Zip Country:* **FALL RIVER, MA 02720 USA**

---

**NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: FALL RIVER FIVE CENTS SAVINGS BANK**

---

**CUSTOMER REFERENCE: LOAN XXXXX8776**

---