

# UCC-1 Form

## FILER INFORMATION

Full name: **ONLINE DEPT.**

Email Contact at Filer: **ONLINE@FICOSO.COM**

## SEND ACKNOWLEDGEMENT TO

Contact name: **FIRST CORPORATE SOLUTIONS INC.**

Mailing Address: **914 S STREET**

City, State Zip Country: **SACRAMENTO, CA 95811 USA**

## DEBTOR INFORMATION

Last Name (i.e. Family Name or Surname): **GATELY** First Name: **JAMES** Middle Name: **W**

Mailing Address: **6 ROBIN ST**

City, State Zip Country: **PROVIDENCE, RI 02908 USA**

Org. Name: **SWG PROMOTIONS**

Mailing Address: **6 ROBIN ST**

City, State Zip Country: **PROVIDENCE, RI 02908 USA**

## SECURED PARTY INFORMATION

Org. Name: **BEACON FUNDING CORPORATION**

Mailing Address: **3400 DUNDEE RD**

City, State Zip Country: **NORTHBROOK, IL 60062 USA**

## TRANSACTION TYPE: STANDARD

ALTERNATIVE DESIGNATION: **LESSEE-LESSOR**

CUSTOMER REFERENCE: **[UCC1-1320705] BFC8484-06/JAMES W GATELY/1223**

## COLLATERAL

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