

# UCC-1 Form

## FILER INFORMATION

Full name: FRANCIS LEO LENNON

Email Contact at Filer: FRANKL69@AOL.COM

## SEND ACKNOWLEDGEMENT TO

Contact name:

Mailing Address: 37 CATHEDRAL AVENUE

City, State Zip Country: PROVIDENCE, RI 02908 USA

## DEBTOR INFORMATION

Org. Name: USS SARATOGA MUSEUM FOUNDATION, INC.

Mailing Address: PO Box 845

City, State Zip Country: NORTH KINGSTOWN, RI 02852 USA

## SECURED PARTY INFORMATION

Last Name (i.e. Family Name or Surname): LENNON First Name: FRANCIS Middle Name: L

Mailing Address: 37 CATHEDRAL AVENUE

City, State Zip Country: PROVIDENCE, RI 02908 USA

## TRANSACTION TYPE: STANDARD

ALTERNATIVE DESIGNATION: CREDITOR

## COLLATERAL

ALL TANGIBLE ASSETS; AMOUNT OF OBLIGATION IS \$150,000