

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: **KRENT/PAFFETT/CARNEY, INC.**

Mailing Address: **111 POINT ST**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

SECURED PARTY INFORMATION

Org. Name: **GENEVA CAPITAL, LLC**

Mailing Address: **1311 BROADWAY ST**

City, State Zip Country: **ALEXANDRIA, MN 56308 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-98973169-69244387

COLLATERAL

THIS IS AN EQUIPMENT LEASE OR FINANCE TRANSACTION FOR THE FOLLOWING EQUIPMENT(S), AGREEMENT # 302223-01 1 - ROUTER: SHOPSABRE PRO-408 PRODUCTION ROUTER SYSTEM - 5 X8 WORKING AREA INCLUDING ALL ACCESSORIES AND ATTACHMENTS THERETO