

# UCC-3 Form - CONTINUATION

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## **FILER INFORMATION**

*Full name:* **JOCELYN AMARAL**

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## **SEND ACKNOWLEDGEMENT TO**

*Contact name:* **BRISTOL COUNTY SAVINGS BANK**

*Mailing Address:* **29 BROADWAY**

*City, State Zip Country:* **TAUNTON, MA 02780 USA**

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**NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: BRISTOL COUNTY SAVINGS BANK**

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