

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: **GLENDAL, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **PUSTERLA US, INC.**

Mailing Address: **293 CHILD STREET**

City, State Zip Country: **WARREN, RI 02885 USA**

SECURED PARTY INFORMATION

Org. Name: **RAYMOND LEASING CORPORATION**

Mailing Address: **22 SOUTH CANAL STREET**

City, State Zip Country: **GREENE, NY 13778 USA**

TRANSACTION TYPE: STANDARD

ALTERNATIVE DESIGNATION: **LESSEE-LESSOR**

CUSTOMER REFERENCE: **RI-0-99400021-69454067**

COLLATERAL

ALL MATERIAL HANDLING EQUIPMENT AND ASSOCIATED ACCESSORIES, INCLUDING WITHOUT LIMITATION, LIFT TRUCKS, PALLET TRUCKS, ORDERPICKERS, BATTERIES AND CHARGERS, IN THE POSSESSION OF DEBTOR OR HEREAFTER ACQUIRED BY DEBTOR IN ACCORDANCE WITH EQUIPMENT MASTER LEASE SCHEDULE NO. 42615 OR ANY SCHEDULE THEREUNDER.