

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: **HODGES BADGE COMPANY, INC.**

Mailing Address: **6440 ENDURO DR.**

City, State Zip Country: **WASHINGTON, MO 63090 USA**

SECURED PARTY INFORMATION

Org. Name: **COMMERCE BANK**

Mailing Address: **811 MAIN ST.**

City, State Zip Country: **KANSAS CITY, MO 64105 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-99608778-69550041

COLLATERAL

ALL INVENTORY, CHATTEL PAPER, ACCOUNTS, EQUIPMENT AND GENERAL INTANGIBLES; WHETHER ANY OF THE FOREGOING IS OWNED NOW OR ACQUIRED LATER; ALL ACCESSIONS, ADDITIONS, REPLACEMENTS, AND SUBSTITUTIONS RELATING TO ANY OF THE FOREGOING; ALL RECORDS OF ANY KIND RELATING TO ANY OF THE FOREGOING.