

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: **MONTAUP COUNTRY CLUB**

Mailing Address: **500 ANTHONY ROAD**

City, State Zip Country: **PORTSMOUTH, RI 02871 USA**

SECURED PARTY INFORMATION

Org. Name: **UNIVEST CAPITAL, INC.**

Mailing Address: **1041 YORK ROAD**

City, State Zip Country: **WARMINSTER, PA 18974 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-101488377-70418189

COLLATERAL

(2) 2024 JACOBSEN JMC ECLIPSE 360 GASOLINE HYBRID ELECTRIC GREENS, (6) TRUESET CUTTING UNIT ECLIPSE 22" 15 BLADE WITH ATTACHMENTS & ACCESSORIES AS FURTHER DESCRIBED ON MTE EQUIPMENT SOLUTIONS, INC INVOICE # 03-399647 DATED 10/30/2024 FROM CONTRACT # 40125137 TOGETHER WITH ALL SUBSTITUTIONS, ADDITIONS, ATTACHMENTS, REPLACEMENTS, ACCESSIONS, INSURANCE PROCEEDS, ADDITIONAL EQUIPMENT AS MAY BE INCLUDED ON THE SUPPLIER(S)' INVOICE(S) SUBMITTED FOR PAYMENT WITH REGARDS TO THIS CONTRACT AND ALL CASH AND NON-CASH PROCEEDS OF THE FOREGOING.