

# UCC-1 Form

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## FILER INFORMATION

Full name: **CORPORATION SERVICE COMPANY**

Email Contact at Filer: **RISOSUCCFILINGSV3@CSCGLOBAL.COM**

## SEND ACKNOWLEDGEMENT TO

Contact name: **CORPORATION SERVICE COMPANY**

Mailing Address: **801 ADLAI STEVENSON DRIVE**

City, State Zip Country: **SPRINGFIELD, IL 62703 USA**

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## DEBTOR INFORMATION

Org. Name: **S. FRANCISCO CONSTRUCTION, INC.**

Mailing Address: **1305 TARKLIN RD**

City, State Zip Country: **BURRILLVILLE, RI 02830 USA**

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Last Name (i.e. Family Name or Surname): **FRANCISCO** First Name: **ROBIN** Middle Name: **PATRICIA**

Mailing Address: **1305 TARKLIN RD**

City, State Zip Country: **BURRILLVILLE, RI 02830 USA**

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## SECURED PARTY INFORMATION

Org. Name: **CHTD COMPANY**

Mailing Address: **P.O. BOX 2576**

City, State Zip Country: **SPRINGFIELD, IL 62708 USA**

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**TRANSACTION TYPE: STANDARD**

**CUSTOMER REFERENCE: 3015 24373**

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**COLLATERAL**

COLLATERAL: ALL PRESENT AND FUTURE ASSETS OF THE DEBTOR