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: **RHODE ISLAND CREDIT UNION**

Mailing Address: **160 FRANCIS STREET**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

SECURED PARTY INFORMATION

Org. Name: **GENEVA CAPITAL, LLC**

Mailing Address: **1311 BROADWAY ST**

City, State Zip Country: **ALEXANDRIA, MN 56308 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-102952814-71111305

COLLATERAL

THIS IS AN EQUIPMENT LEASE OR FINANCE TRANSACTION FOR THE FOLLOWING EQUIPMENT(S), AGREEMENT # 307994-01 3 - VISION FITNESS T600NT AC MOTOR TREADMILL: 1 - VISION FITNESS S700ENTL SUSPENSION ELLIPTICAL: 1 - VISION FITNESS R600ENT STEP-THRU RECUMBENT BIKE: 1 - VISION FITNESS U600ENT UPRIGHT BIKE: 5 - VISION FITNESS TV TUNER PLUG-IN: 1 - INSPIRE FITNESS FT1 FUNCTIONAL TRAINER: INCLUDING ALL ACCESSORIES AND ATTACHMENTS THERETO