

UCC-1 Form

FILER INFORMATION

Full name: **JENNIE STEVENSON**

Email Contact at Filer: **JENNIE.STEVENSON@USBANK.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **US BANK NA**

Mailing Address: **PO BOX 20005**

City, State Zip Country: **OWENSBORO, KY 42304 USA**

DEBTOR INFORMATION

Org. Name: **DEL'S LEMONADE & REFRESHMENTS, INC**

Mailing Address: **1260 OAKLAWN AVE**

City, State Zip Country: **CRANSTON, RI 02920 USA**

SECURED PARTY INFORMATION

Org. Name: **US BANK NA**

Mailing Address: **PO BOX 20005**

City, State Zip Country: **OWENSBORO, KY 42304 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 7206 JS

COLLATERAL

2019 ALLFILL A1200-R SYS-339-TRCH