

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: **GLENDAL, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **J.R. VINAGRO CORPORATION**

Mailing Address: **2208 PLAINFIELD PIKE**

City, State Zip Country: **JOHNSTON, RI 02919 USA**

SECURED PARTY INFORMATION

Org. Name: **1ST SOURCE BANK, CONSTRUCTION EQUIPMENT DIVISION**

Mailing Address: **P.O. BOX 783**

City, State Zip Country: **SOUTH BEND, IN 46624 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-103893411-71554880

COLLATERAL

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