

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: **AETNA BRIDGE COMPANY**

Mailing Address: **100 JEFFERSON BLVD., STE 100**

City, State Zip Country: **WARWICK, RI 02888 USA**

Org. Name: **LOCKBRIDGE EQUIPMENT COMPANY**

Mailing Address: **100 JEFFERSON BLVD., STE 100**

City, State Zip Country: **WARWICK, RI 02888 USA**

SECURED PARTY INFORMATION

Org. Name: **WEBSTER CAPITAL FINANCE, A DIVISION OF WEBSTER BANK, N.A.**

Mailing Address: **145 BANK ST. LEGAL DEPT MO-325**

City, State Zip Country: **WATERBURY, CT 06702 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-103947183-71582060

COLLATERAL

(1) - OXBLUE 8MP SAPPHIRE SERIES PTZ CELLULAR CAMERA, VIN: 119398 (1) - OXBLUE 8MP SAPPHIRE SERIES PTZ CELLULAR CAMERA, VIN: 119964 (1) - 2025 AMERICAN SIGNAL T-25 SENSOR TRAILER, VIN: 1A9AS0258R2228745 (1) - 2025 AMERICAN SIGNAL T-25 SENSOR TRAILER, VIN: 1A9AS0251R2228747 AND ANY AND ALL EQUIPMENT FINANCED BY SECURED PARTY, AS LESSOR, FROM TIME TO TIME, PURSUANT TO THAT CERTAIN MASTER LEASE AGREEMENT NO. 73501 DATED SEPTEMBER 6, 2019, INCLUDING ANY AND ALL ACCESSORIES, ACCESSIONS, SUBSTITUTIONS, REPLACEMENT PARTS, REPLACEMENTS, ATTACHMENTS, PROCEEDS AND INSURANCE PROCEEDS. #73501-035