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Cook County Recorder 23.50

FINANCING STATEMENT - FOLLOW INSTRUCTIONS CAREFULLY

This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional)	B. FILING OFFICE ACCT.# (optional)
C. RETURN COPY TO: (Name and Mailing Address) INCLUDE TO: 1573642-7 Lexis Document Services 135 South LaSalle Street Suite 2260 Chicago, IL 60603	



D. OPTIONAL DESIGNATION if applicable: LESSOR/LESSEE CONSIGNOR/CONSIGNEE NON-UCC FILING

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b)

1a. ENTITY'S NAME

OR

1b. INDIVIDUAL'S LAST NAME McCLANAHAN	FIRST NAME TOM	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 3209 OLD HIGGINS ROAD		CITY ELK GROVE VILLAGE	STATE IL COUNTRY POSTAL CODE 60018
1d. S.S. OR TAX I.D.# 235-46-7839	OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	1e. TYPE OF ENTITY	1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION

1g. ENTITY'S ORGANIZATIONAL I.D.#, if any NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b)

2a. ENTITY'S NAME

OR

2b. INDIVIDUAL'S LAST NAME McCLANAHAN	FIRST NAME ELSA	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS 3209 OLD HIGGINS ROAD		CITY ELK GROVE VILLAGE	STATE IL COUNTRY POSTAL CODE 60018
2d. S.S. OR TAX I.D.# 234-52-2291	OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	2e. TYPE OF ENTITY	2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION

2g. ENTITY'S ORGANIZATIONAL I.D.#, if any NONE

3. SECURED PARTY'S (ORIGINAL S/P OR ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME - insert only one secured party name (3a or 3b)

3a. ENTITY'S NAME
FIRST MIDWEST BANK, NATIONAL ASSOCIATION

OR

3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 300 PARK BOULEVARD, SUITE 400		CITY ITASCA	STATE IL COUNTRY POSTAL CODE 60143

4. This FINANCING STATEMENT covers the following types or items of property: All fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds).

This Financing Statement is to be recorded in the real estate records. Some or all of the collateral is located on the following described real estate: LOTS 1, 2 AND 3 IN BLOCK 1 IN ELK GROVE HIGH VIEWS, BEING A SUBDIVISION OF ALL THAT PART OF THE EAST 1/2 OF THE NORTHWEST 1/4 OF SECTION 36, TOWNSHIP 41 NORTH, RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING SOUTH OF THE CENTER LINE OF HIGGINS ROAD (EXCEPT THE WEST 260 FEET THEREOF), IN COOK COUNTY, ILLINOIS.

Pr. # 08-36-103-008, 009, 010

5. CHECK BOX if applicable <input type="checkbox"/> This FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest (a) in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or (b) in accordance with other statutory provisions [additional data may be required]	7. If filed in Florida (check one) <input type="checkbox"/> Documentary stamp tax paid <input checked="" type="checkbox"/> Documentary stamp tax not applicable
6. REQUIRED SIGNATURE(S) <i>TOM McCLANAHAN</i> TOM McCLANAHAN <i>Elsa McClanahan</i> 01-06-00 ELSA McCLANAHAN	8. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Attach Addendum (if applicable) 9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) (ADDITIONAL FEE) (optional) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2