

UNOFFICIAL COPY

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY



0020956382

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SE LexisNexis Document Solutions
P. O. Box 2969
Springfield, Illinois 62708

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S LAST NAME: SCOTT
FIRST NAME: WALTER
MIDDLE NAME: G.
SUFFIX:

1c. MAILING ADDRESS: 8154 N. KEATING AVENUE
CITY: SKOKIE
STATE: IL
POSTAL CODE: 60076
COUNTRY: USA

1d. TAX ID #, SSN OR EIN: 323-34-0169
ADD'L INFO RE ORGANIZATION DEBTOR
1e. TYPE OF ORGANIZATION: INDIVIDUAL
1f. JURISDICTION OF ORGANIZATION
1g. ORGANIZATIONAL ID #, if any NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S LAST NAME
FIRST NAME
MIDDLE NAME
SUFFIX

2c. MAILING ADDRESS
CITY
STATE
POSTAL CODE
COUNTRY

2d. TAX ID #, SSN OR EIN
ADD'L INFO RE ORGANIZATION DEBTOR
2e. TYPE OF ORGANIZATION
2f. JURISDICTION OF ORGANIZATION
2g. ORGANIZATIONAL ID #, if any NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME: BANKFINANCIAL, F.S.B.

OR

3b. INDIVIDUAL'S LAST NAME
FIRST NAME
MIDDLE NAME
SUFFIX

3c. MAILING ADDRESS: 1200 INTERNATIONALE PARKWAY,
CITY: WOODRIDGE
STATE: IL
POSTAL CODE: 60517
COUNTRY:

4. This FINANCING STATEMENT covers the following collateral:
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)

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum if applicable

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA: Cook County Recorder (IL) 01752283-1

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9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S LAST NAME: SCOTT
FIRST NAME: WALTER
MIDDLE NAME, SUFFIX: G.

10. MISCELLANEOUS:

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME
FIRST NAME
MIDDLE NAME
SUFFIX

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