## JNOFFICIAL C 1452/0029 49 001 Page 1 of

2002-09-03 10:10:45

Cook County Recorder

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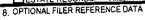
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FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] CHRISTA KEENAN (630) 833-6222 B. SEND ACKNOWLEDGMENT TO: (Name and Address) CITIZENS FINANCE COMPANY 188 INDUSTRIAL DRIVE SUITE 128 ELMHURST, IL 60126



L 'O <sub>4</sub>	E SPACE IS FOR FILING OFFICE USE ONLY				
1. DEBTOR'S EXACT FULL LEGAL NA.V. F isert only one debtor na	me (1a or 1b) - do not abbreviate or combine names				
1a. ORGANIZATION'S NAME					
OR 16. INDIVIDUAL'S LAST NAME	FIRST NAME MANUEL	MIDDLEN	MIDDLE NAME		
SOLIS  1c. MAILING ADDRESS  1c. MAILING ADDRESS	CHICAGO	STATE IL	POSTAL CODE 60609	COUNTRY	
2246 W 50TH PLACE  1d. TAX ID #: SSN OR EIN   ADD'L INFO RE   1e. TYPE OF ORGANIZATION   DEBTOR   DEBT		1g. ORGA	NIZATIONAL ID #, if any	NONE	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert or 2a. ORGANIZATION'S NAME	nly one debtor nar • (2a or 2b) - do not abbreviate or com	bine names			
OR 26, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE		SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
2d. TAX ID #: SSN OR EIN ADD'L INFO RE   2e. TYPE OF ORGANIZATION DEBTOR			ANIZATIONAL ID#, if any	NONE	
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of AS 3a. ORGANIZATION'S NAME	SIGNOR S/P) - insert only <u>one</u> secured party name (3a o	20,0			
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MILDLE	2,	SUFFIX	
3c. MAILING ADDRESS 188 INDUSTRIAL DRIVE SUITE 128	CITY ELMHURST	STATE IL	PO STAL CODE 60120	COUNTRY	

CONSIGNEE/CONSIGNE	NOR BAILEE/BAILOR SELLER/BUYER AG LIEN NON-UCCFILIN
5. ALTERNATIVE DESIGNATION [if applicable]: [Cosecution recorded] in the REAL and 7 Check to	to REQUEST SEARCH REPORT(S) on Debtor(s)   All Debtors
ESTATE RECORDS. Attach Addendum III applicable   1200111	JONACT EE



4. This FINANCING STATEMENT covers the following collateral:



PURCHASE AND INSTALLATION OF A HOME WATER TREATMENT SYSTEM.

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Property of Cook County Clark's Office

FOLLOW INSTRUCTIONS (from			- 1			
9. NAME OF FIRST DEBTOR	(1a or 1b) ON RELATED FINANCING S	TATEMENT				
9a. ORGANIZATION'S NAME						
OR Ch. INDIVIDUALIS LA PERSONA		·				
96. INDIVIDUAL'S LAST NAME SOLIS	111011111111111111111111111111111111111	MIDDLE NAME, SUF	FiX			
	MANUEL		J			
10.MISCELLANEOUS:			İ			
	000 m		THE AROUS	E SDACE	IS FOR FILING OFFICE	lies out v
11. ADDITIONAL DEBTOR'S	EXACT FULL LEGAL N :: - insert only one	name (11a or 11b) - do not abl	reviete er combine een	- SFACE	IS FOR FILING OFFICE	USEONLY
TIA. ORGANIZATION'S NAME	Ox	2 man (112 01 115) - 05 hot abr	Staviate of combine flati	05	<del>,</del>	<u> </u>
116. INDIVIDUAL'S LAST NAME	C	FIRST NAME		MIDDLE	NAME	SUFFIX
1c. MAILING ADDRESS				STATE	POSTAL CODE	COUNTRY
1d. TAX ID #: SSN OR EIN ADD ORG DEB	LINFO RE 11e. TYPE OF ORGANIZATION ANIZATION TOR	11f. JUI JSDICT SNOF ORG	SANIZATION	11g. ORG	ANIZATIONAL ID #, if any	Пиои
2. ADDITIONAL SECURE 12a. ORGANIZATION'S NAME	D PARTY'S ☑ ASSIGNOR S/P'	S NAME - insert or, v or 4 F3	me (12a or 12b)	<del>'-</del>		[ ]NON
DR		9	O <sub>×</sub>			
12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE.	NAME	SUFFIX
2c. MAILING ADDRESS						
20. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
3. This FINANCING STATEMENT of	overs timber to be cut or as-extracted	16. Additional collateral des		<u> </u>		
collateral, or is filed as a 🔽 fixt		16. Additional collateral des	scription:	4	/	
4. Description of real estate:					0	
BLOCK 34 EXCEPT 1 CORNER OF STONE SUBDIVISION OF SE	CTIONS 6 AND 7, H, RANGE 14 EAST OF THE				Office	
PN: 20-07-115	-025-0000					
Name and address of a RECORD     (if Debtor does not have a record is	OWNER of above-described real estate interest):					
		17. Check only if applicable a				
		Debtor is a Trust or	Trustee acting with re-	spect to pro	perty held in trust or D	ecedeni's Estate
		18. Check <u>only</u> if applicable a	and check <u>only</u> one box			
		Deblor is a TRANSMITTII				
		Filed in connection with a				
		Filed in connection with a	Public-Finance Transa	ction — effe	ctive 30 years	

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