## WOFFICIAL CORM51211

6303/0280 18 001 Page 1 of 3
2003-04-04 10:57:00
Cook County Reporter 20.00

## UCC FINANCING STATEMENT

FOLLOWINSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

John Sheahan (773) 292-6272

B. SEND ACKNOWLEDGEMENT TO: (Name and Address)

MB Financial Bank, N.A.

Loan Documentation

1200 N. Ashland Avenue

Chicago, IL 60622

0030451211

919

CT10F THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S EXACT FULL LEGAL NAME -insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME SOUTH HOLLAND TRUST & SAVINGS BANK U/T/A DTD 4/1/76 & KNOWN AS TRUST # 3027 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 1c. MAILING ADDRESS POSTAL CODE COUNTRY 16178 S. PARK AVENUE SOUTH HOLLAND IL 60473 **USA** 1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGA (IZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any , ORGANIZATION DEBTOR TRUST ILNONE 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only o e dr btc name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRS, MAME 2c. MAILING ADDRESS POSTAL CODE COUNTRY 2d. TAX ID #: SSN OR EIN ADD'L INFO RE | 2e, TYPE OF ORGANIZATION 21. JURISDICTION OF OF CANIZATION 2g. ORGANIZATIONAL ID#, if any **ORGANIZATION** DEBTOR NONE SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name ("a or 3b) 3a. ORGANIZATION'S NAME MB FINANCIAL BANK, N.A. 3b. INDIVIDUAL'S LAST NAME FIRST NAME NID DLE NAME SUFFIX 3c. MAILING ADDRESS FUSTAL CODE COUNTRY SOUTH HOLLAND 60473 475 E. 162ND STREET IL

4. This FINANCING STATEMENT covers the following collateral:

Collateral Assignment of Beneficial Interest in South Holland Trust and Savings Bank, Not Personally But as Trustee Under Trust Agreement Dated April 1, 1976 and Known as Trust Number 3027, covering collateral property commonly known as 14075 Lincoln Avenue Dolton, IL 60419, as further described therein; 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)

BOX 333-CT

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 file ESTATE RECORDS Attach Addendum	d [for record] (or recorded) in the REAL [if applicable]	7 Check to REQUEST SEARCH REP	PORT(S) on Debtor(s) [optional] All I	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	<del></del>			<del>-</del>

## UNOFFICIAL COPY

UCC FINANCING STATEMENT	
FOLLOWINSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]  John Sheahan (773) 292-6272	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)  MB Financial Bank, N.A. Loan Documentation 1200 N. Ashland Avenue Chicago, IL 60622	
L A	THE ABO
DEBTOR'S EXACT FULL LE 3A', N'AME - insert only one debtor name (1a     1a, ORGANIZATION'S NAME	
OR SOUTH HOLLAND TRUST & SAVINGS I	FIRST NAME
1c. MAILING ADDRESS 16178 S. PARK AVENUE	SOUTH HOLLAND
1d. TAX ID #: SSN OR EIN   ADD'L INFO RE   1e. TYPE OF ORGA IZATION   ORGANIZATION   TRUST	1f. JURISDICTION OF ORGANIZATION IL

THE ABOVE	SPACE	IS FOR	FILING	OFFICE	USE ONLY

	1a. ORGANIZATION'S NAME SOUTH HOLLAND TRUST & SAVINGS BANK U/T/A DTD 4/1/76 & KNOWN AS TRUST # 3027								
Th. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX				
1c. MAILING ADDRESS 16178 S. PARK	AVENUE	0,5	SOUTH HOLLAND	STATE	POSTAL CODE 60473	COUNTRY			
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	18. TYPE OF ORGA (IZATION TRUST	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if an	y None			
2. ADDITIONAL DEBTO	R'S EXACT FULL	LEGAL NAME - insert only or e o	r of aname (2a or 2b) - do not abbreviate or com	bine names					
2a. ORGANIZATION'S N	AME		$ au_{\bigcirc}$						
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME					
2c. MAILING ADDRESS			СПУ	STATE	POSTAL CODE	COUNTRY			
2d. TAX ID#: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	24. JURISDICTION OF OF SANIZATION	2g. ORG	ANIZATIONAL ID#, if an	y NONE			
		of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only one secured party name " a cr	3b)					
3a. ORGANIZATION'S N MB FINANO		ζ, N.A.		4,					
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	A 'D DLE	N ID DLE NAME					
3c. MAILING ADDRESS 475 E. 162ND STREET			SOUTH HOLLAND	STATE	of 473	COUNTRY			

4. This FINANCING STATEMENT covers the following collateral:

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## 30451211

5.	ALTERNATIVE DESIGNATION (if applicable):	LESSEE/LESSOR	CONSIGNEE/CO	ONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-L	JCC FILING
6.	This FINANCING STATEMENT is to be filed ESTATE RECORDS Attach Addendum	[for record] (or recorded	i) in the REAL 7	Check to REQ	UEST SEARCH REPO	ORT(S) on Debtor(s)	All Debtors	Debtor 1	Debtor 2
8.	OPTIONAL FILER REFERENCE DATA								

rights, watercourses and ditch rights (including stock in utilities with ditch or irrigation rights); and all other rights, royalties, and profits relating to the real property, including without limitation alluming air, oir, gas, geothermal and similar matters, (the "Real Property") to sate in Lock County. State of Utilinois:

The Southeactorly 40 Feet of Lot 2, in Bertha H. Zimmer's Subdivision of Outlete 2 and 3 and the Northwesterly 35 Feet of Outlet 1 in Dolton in the West 1/2 of the Northeast 1/4 of Section 3, Township 36 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois

The Real Property or its address is commonly known as 14075 Lincoln Avenue, Dolton, IL 60419. The

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Property of County Clerk's Office