

LT1C03-10266

UNOFFICIAL COPY



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

Doc#: 0328304138
Eugene "Gene" Moore Fee: \$26.00
Cook County Recorder of Deeds
Date: 10/10/2003 12:40 PM Pg: 1 of 1

A. NAME & PHONE OF CONTACT AT FILER [optional]
B. SEND ACKNOWLEDGMENT TO: (Name and Address)
Prepared by and
mailed to
GLENVIEW STATE BANK
800 WAUKEGAN ROAD
GLENVIEW IL 60025

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: WITT
FIRST NAME: BURTON
MIDDLE NAME: T.
SUFFIX:
1c. MAILING ADDRESS: 131 LOCKERBIE LANE, WILMETTE, IL 60091, USA
1d. TAX ID #: 354-24-9757
1e. TYPE OF ORGANIZATION: INDIVIDUAL
1f. JURISDICTION OF ORGANIZATION:
1g. ORGANIZATIONAL ID #: 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: WITT
FIRST NAME: CHARLOTTE
MIDDLE NAME:
SUFFIX:
2c. MAILING ADDRESS: 131 LOCKERBIE LANE, WILMETTE, IL 60091, USA
2d. TAX ID #: 341-28-6095
2e. TYPE OF ORGANIZATION: INDIVIDUAL
2f. JURISDICTION OF ORGANIZATION:
2g. ORGANIZATIONAL ID #: 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: GLENVIEW STATE BANK
OR 3b. INDIVIDUAL'S LAST NAME:
FIRST NAME:
MIDDLE NAME:
SUFFIX:
3c. MAILING ADDRESS: 800 WAUKEGAN ROAD, GLENVIEW, IL 60025, USA

4. This FINANCING STATEMENT covers the following collateral:

LOT 10 IN LOCKERBIE COUNTRY ESTATES, BEING A SUBDIVISION
IN SECTION 31, TOWNSHIP 42 NORTH, RANGE 13, EAST OF THE
THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS
PIN#05-31-421-010-0000

5. ALTERNATIVE DESIGNATION (if applicable)
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum.
7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE)
8. OPTIONAL FILER REFERENCE DATA

FILING OFFICER COPY

NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)

REORDER FROM
Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(763) 421-1713