## INOFFICIAL COPY

Return To: LexisNexis Document Solutions 801 Ad'ai Stevenson Drive UCC **FOLLO** A. NAM Springfield, IL 62703 Phone: 300-634-9738 B. SEN 8966313 - 2 Courier: First Class Mail Debtor: MILLIS , WILLIE Juris Cook County, IL



Doc#: 0402627129

Eugene "Gene" Moore Fee: \$28.00 Cook County Recorder of Deeds Date: 01/26/2004 03:57 PM Pg: 1 of 3

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. D	EBTOR'S EXACTFUL	L'ESAL NAME -	insert only <u>one</u> debtor name (1 a or 1 b	)-do not abbreviate or combine names				
	1a. ORGANIZATION'S NAM							
OR 15. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE	MIDDLE NAME		IX.	
	MILLS			MILLIE				
1c. N	AAILING ADDRESS			спу	STATE	POSTAL CODE	con	NTRY
80	2 S. HOMAN	Ī	9/	CHICAGO	IL	60624	US	SA
1d. SEEINSTRUCTIONS ADD'L INFO RE 1e. TYPE OF C (GAN) ATION			1f. JURISDICTION OF ORGANIZATION	1g. ORG.	1g. ORGANIZATIONAL ID #, if any			
		ORGANIZATION DEBTOR	FSB	IL				NONE
2. A	DDITIONAL DEBTOR	'S EXACT FULL	LEGAL NAME - insert c ily o e c	lobtor name (2a or 2b) - do not abbreviate or c	ombine names			
	2a, ORGANIZATION'S NAI	ME	7					
			*					
OR	2b. INDIVIDUAL'S LAST N	AME		FIRST NAME	MIDDLE	MIDDLE NAME SUFF		
	MILLS			BIRLENE				
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	cou	NTRY	
802 S. HOMAN				CHICAGO	IL	60624	US	SA
2d. <u>s</u>	SEEINSTRUCTIONS	ADD'L INFO RE	2e. TYPE OF ORGANIZATION	2f, JURISDICTION C. CO. (GANIZATION	2g. ORG	ANIZATIONAL ID #, if any		
		ORGANIZATION DEBTOR	FSB	IL				NONE
3. S	ECURED PARTY'S N	NAME (or NAME of	TOTAL ASSIGNEE of ASSIGNOR S/	P) • insert only <u>one</u> secured party name (3a or Jb	)			
	3a. ORGANIZATION'S NA	ME						
OR BANK FINANCIAL F.S.B. 3b. INDIVIDUAL'S LAST NAME FIRST NAME								
OR	3b. INDIVIDUAL'S LAST N	IAME	<u></u>	FIRST NAME	MIDDLE	NAME	SUFI	FIX
					0.			
3c. I	L MAILING ADDRESS	· · · · · ·	<del>,</del>	спү	STATE	POSTAL CODE	con	INTRY
15 WOOD N FRONTAGE POAD			BURR RIDGE	II.	50527	US	SA.	

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) for Property located at 5207-09 W. Ferdinand Street, Chicago, IL 60644. P.I.N.# 16-09-124-047-0000.

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-U	CC FILING
6. This FINANCING STATEMENT is to be filed (for record) (or recorded)  ESTATE RECORDS. Attach Addendum	in the REAL 7. Check to RE	QUEST SEARCH REPO	RT(S) on Debtor(s)	All Debtors	Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA 1900028684	(III doubled   II to be					

4. This FINANCING STATEMENT covers the following collateral:

IL-Cook County

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## **UNOFFICIAL COPY**

UCC FINANCING STATE FOLLOW INSTRUCTIONS (front and bar					
9. NAME OF FIRST DEBTOR (1a or 1b		ATEMENT			
9a. ORGANIZATION'S NAME					
OR 9b. INDIVIDUAL'S LAST NAME	In continue				
MILLS	FIRST NAME WILLIE	MIDDLE NAME, SUFFIX			
10. MISCELLANEOUS: IL-Cook					
11 cook	country				
000	6 <u></u>		THE ABOVE SPACE	IS FOR FILING OFFI	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT F	LL LEGAL NAME - insert only one	name (11a or 11b) - do not abbrevia	ate or combine names		
TIB. ORGANIZATION 5 NAME					
OR 11b. INDIVIDUAL'S LAST NAME	- O,c	FIRST NAME	MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS	0	αίν	STATE	POSTAL CODE	COUNTRY
ADD'L INFO R ORGANIZATIO DEBTOR	NO.	11f.JURISDICTIONOF ORGAN		GANIZATIONAL ID #, if a	none
12. ADDITIONAL SECURED PART 12a. ORGANIZATION'S NAME	TY'S or ASSIGNOR S/P'	S NAME - insert only <u>one</u> name (	12a or 12b)		
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS	·	CITY	STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers	timber to be cut or as-extracted	16. Additional collateral descrip	tior.		
collateral, or is filed as a fixture filing 14. Description of real estate:			14,		
LOT 25 (EXCEPT T	HE EAST 63		2,		
FEET THEREOF) IN	BLOCK 1 IN				
E.P. STEVENS ADD	ITION TO			)ffic	
CHICAGO, BEING A	SUBDIVISION				
OF THE EAST HALF	OF THE			.00	
SOUTHEAST QUARTE	R OF THE			C	
NORTHWEST QUARTE	R OF SECTION				
9, TOWNSHIP 39 N	ORTH, RANGE				
13, EAST OF THE	THIRD				
15. Name and address of a RECORD OWNEr (if Debtor does not have a record interest):					
WILLIE MILLS					
802 S. HOMAN	17. Check only if applicable and	check only one box		<u>.</u>	
CHICAGO, IL 6062	17. Check only if applicable and check only one box.  Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Esta				
CITTORGO, III 0002	-	18. Check only if applicable and			
		Debtoris a TRANSMITTING	GUTILITY		
			Manufactured-Home Transaction		
		Filed in connection with a F	Public-Finance Transaction — e		Document Solution

0402627129 Page: 3 of 3

## **UNOFFICIAL COPY**

UCC FINANCING STATE! FOLLOW INSTRUCTIONS (front and back					
9. NAME OF FIRST DEBTOR (1a or 1b		EMENT			
9a. ORGANIZATION'S NAME	,				
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUFFIX			
MILLS	WILLIE				
10.MISCELLANEOUS: IL-Cook					
	councy				
	<u> </u>			E IS FOR FILING OF	TICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT F	LEGAL NAME - insert only one na	rne (11a or 11b) - do not abbrevi	iate or combine names		
11a. ORGANIZATION'S NAME					
OR 11b. INDIVIDUAL'S LAST NAME	<u> </u>	FIRST NAME	MIDE	LE NAME	SUFFIX
TIS INDIVIDUALS EAST NAME		TROTIONE	NIDE	CC NAME	301114
11c. MAILING ADDRESS		aty	STAT	E POSTAL CODE	COUNTRY
ADD'L INFO R ORGANIZATIO DEBTOR		11f.JURISDICTIONOF ORGAN	NIZATION 11g. (	) DRGANIZATIONAL ID #, if	any
12. ADDITIONAL SECURED PAR	TY'S or ASSIGNOR S/P'S	VAME - insert only one name	(12a or 12b)		
12a. ORGANIZATION'S NAME		0,	,		
OR THE PROPERTY OF THE PROPERT		9			
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDE	ILE NAME	SUFFIX
12c. MAILING ADDRESS		CITY	STAT	E POSTAL CODE	COUNTRY
120. MAILING ADDRESS		ату	O .	POSTALOODE	Socient
13. This FINANCING STATEMENT covers collateral, or is filed as a fixture filing 14. Description of real estate:		16. Additional collateral descri	ption.	<u> </u>	<u></u>
PRINCIPAL MERIDIA COUNTY, ILLINOIS			0,5.		
				Office	
Name and address of a RECORD OWNEI     (if Debtor does not have a record interest):					
BIRDENE MILLS					
802 S. HOMAN	17. Check only if applicable ar	nd check only one box.			
CHICAGO, IL 6062	4	Debtor is a Trust or		to property held in trust	or Decedent's Estate
CHICAGO, III 0002	18. Check only if applicable ar				
		Debtoris a TRANSMITTIN	GUTILITY		
		<b> </b>	Manufactured-Home Transa		
		Filed in connection with a	Public-Finance Transaction	— effective 30 years	