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Doc#: 0428019159  
Eugene "Gene" Moore Fee: \$30.00  
Cook County Recorder of Deeds  
Date: 10/06/2004 02:31 PM Pg: 1 of 4

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

1331117

575

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

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

FIRST NATIONS BANK  
7757 W. DEVON AVENUE  
CHICAGO, IL 60631-1509

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: CASTELLANO  
FIRST NAME: SIMONE  
MIDDLE NAME:   
SUFFIX:   
1c. MAILING ADDRESS: 8520 GREENWOOD  
CITY: NILES  
STATE: IL  
POSTAL CODE: 60714  
COUNTRY: USA  
1d. SEE INSTRUCTIONS  
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: CASTELLANO  
FIRST NAME: PATRICIA  
MIDDLE NAME:   
SUFFIX:   
2c. MAILING ADDRESS: 8520 GREENWOOD  
CITY: NILES  
STATE: IL  
POSTAL CODE: 60714  
COUNTRY: USA  
2d. SEE INSTRUCTIONS  
ADD'L INFO RE ORGANIZATION DEBTOR  
2e. TYPE OF ORGANIZATION: INDIVIDUAL  
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: FIRST NATIONS BANK

OR

3b. INDIVIDUAL'S LAST NAME  
FIRST NAME  
MIDDLE NAME  
SUFFIX  
3c. MAILING ADDRESS: 7757 W. DEVON AVENUE  
CITY: CHICAGO  
STATE: IL  
POSTAL CODE: 60631-1509  
COUNTRY: USA

4. This FINANCING STATEMENT covers the following collateral:

All Inventory, Chattel Paper, Accounts, Equipment and General Intangibles; together with the following specifically described property: all present and future accounts receivable, contract rights and chattel paper, whether arising from the sale, lease or other disposition of inventory or the rendition of services or to otherwise and all returned or repossessed goods related thereto and all proceeds thereof. All inventory now owned or hereafter acquired, whether raw material, work in process, or finished goods, and all materials now owned or hereafter acquired and used or useable in connection with the manufacturing, processing, servicing, packaging, storing or selling any such inventory and all proceeds and products any of the foregoing, at the above location or any other location owned or hereafter acquired. All option rights to purchase any and all real estate, all furniture, fixtures, equipment and chattels of every kind used in debtor's business at the above location or any other location owned or hereafter acquired, and all character; all tangible and intangible property of the debtor including inventory and accounts receivable, 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 other accounts proceeds).

5. ALTERNATIVE DESIGNATION (if applicable):  
 LESSEE/LESSOR  
 CONSIGNEE/CONSIGNOR  
 BAILEE/BAILOR  
 SELLER/BUYER  
 AG. LIEN  
 NON-UCC FILING  
 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) [ADDITIONAL FEE] (optional)  
 All Debtors  
 Debtor 1  
 Debtor 2  
 8. OPTIONAL FILER REFERENCE DATA

ATGF, INC

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## UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

### 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME		
OR 9b. INDIVIDUAL'S LAST NAME <b>CASTELLANO</b>	FIRST NAME <b>SIMONE</b>	MIDDLE NAME, SUFFIX

### 10. MISCELLANEOUS:

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

11a. ORGANIZATION'S NAME				
OR 11b. INDIVIDUAL'S LAST NAME <b>AMERIO</b>	FIRST NAME <b>JOSEPH</b>	MIDDLE NAME	SUFFIX	
11c. MAILING ADDRESS <b>1624 E CRABTREE</b>		CITY <b>ARLINGTON HEIGHTS</b>	STATE <b>IL</b>	POSTAL CODE <b>60004</b>
11d. <b>SEE INSTRUCTIONS</b>	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION <b>INDIVIDUAL</b>	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE

### 12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME				
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 collateral, or is filed as a  fixture filing.

### 14. Description of real estate:

**LOTS 4 AND 5, TOGETHER WITH THE SOUTHWESTERLY 1/2 OF THE VACATED ALLEY LYING NORTHEASTERLY AND ADJOINING SAID LOTS 4 AND 5, IN CHARLES A. SCOTT'S PARK RIDGE VILLAS, BEING A SUBDIVISION OF THE SOUTH 1/2 OF SECTION 22, TOWNSHIP 41 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.**

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

### 16. Additional collateral description:

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 Estate

18. Check only if applicable and check only one box.

- Debtor is a TRANSMITTING UTILITY
- Filed in connection with a Manufactured-Home Transaction - effective 30 years
- Filed in connection with a Public-Finance Transaction - effective for 30 years

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9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S LAST NAME

CASTELLANO

FIRST NAME

SIMONE

MIDDLE NAME, SUFFIX

### 10. MISCELLANEOUS:

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11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME

AMERIO

FIRST NAME

SIMONE

MIDDLE NAME

SUFFIX

### 11c. MAILING ADDRESS

1624 E CRABTREE

### CITY

ARLINGTON HEIGHTS

### STATE

IL

### POSTAL CODE

60004

### COUNTRY

USA

### 11d. SEE INSTRUCTIONS

ADD'L INFO RE  
ORGANIZATION  
DEBTOR

### 11e. TYPE OF ORGANIZATION

INDIVIDUAL

### 11f. JURISDICTION OF ORGANIZATION

### 11g. ORGANIZATIONAL ID #, if any

NONE

### 12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

OR

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

### 12c. MAILING ADDRESS

### CITY

### STATE

### POSTAL CODE

### COUNTRY

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Debtor is a TRANSMITTING UTILITY

Filed in connection with a Manufactured-Home Transaction - effective 30 years

Filed in connection with a Public-Finance Transaction - effective for 30 years

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Legal Description:

LOTS 4 AND 5, TOGETHER WITH THE SOUTHWESTERLY 1/2 OF THE VACATED ALLEY LYING NORTHEASTERLY AND ADJOINING SAID LOTS 4 AND 5, IN CHARLES A. SCOTT'S PARK RIDGE VILLAS, BEING A SUBDIVISION OF THE SOUTH 1/2 OF SECTION 22, TOWNSHIP 41 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office