

UNOFFICIAL COPY

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY



Doc#: 0429419083
Eugene "Gene" Moore Fee: \$26.50
Cook County Recorder of Deeds
Date: 10/20/2004 01:51 PM Pg: 1 of 2

A. NAME & PHONE OF CONTACT AT FILER [optional]
Phone: (800) 331-3282 Fax: (818) 662-4141

B. SEND ACKNOWLEDGEMENT TO: (Name and Address)
UCC Direct Services 6401625
P.O. Box 29071
Glendale, CA 91209-9071
IL IL
FIXTURE

File with: Cook, IL

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: DAVIS
FIRST NAME: WANDA
MIDDLE NAME: L
SUFFIX:

1c. MAILING ADDRESS: 20073 CRESCENT AVE.
CITY: LYNWOOD
STATE: IL
POSTAL CODE: 60411
COUNTRY:

1d. SEE INSTRUCTIONS
ADD'L INFO RE ORGANIZATION DEBTOR
1e. TYPE OF ORGANIZATION
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
FIRST NAME
MIDDLE NAME
SUFFIX

2c. MAILING ADDRESS
CITY
STATE
POSTAL CODE
COUNTRY

2d. SEE INSTRUCTIONS
ADD'L INFO RE ORGANIZATION DEBTOR
2e. TYPE OF ORGANIZATION
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
PRIME ACCEPTANCE CORPORATION

OR

3b. INDIVIDUAL'S LAST NAME
FIRST NAME
MIDDLE NAME
SUFFIX

3c. MAILING ADDRESS: 200 W. JACKSON #720
CITY: CHICAGO
STATE: IL
POSTAL CODE: 60606
COUNTRY:

4. This FINANCING STATEMENT covers the following collateral:

HOME CARPETING

PIN 33-07-306-003-0000

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 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
6401625 626020431

Handwritten signatures and initials:
S/M
P2
S/M
M/K
P/M

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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 | FIRST NAME |
| | DAVIS | WANDA |
| | | MIDDLE NAME, SUFFIX |
| | | L |

10. MISCELLANEOUS

6401625-41-1

510656 IPRIMEACCEPT

626020431

File with: Cook+, IL

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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 | FIRST NAME | MIDDLE NAME |
| | | | SUFFIX |
| 11c. MAILING ADDRESS | | CITY | STATE |
| | | | POSTAL CODE |
| | | | COUNTRY |
| 11d. SEE INSTRUCTION | ADD'L INFO RE ORGANIZATION DEBTOR | 11e. TYPE OF ORGANIZATION | JURISDICTION OF ORGANIZATION |
| | | | 11g. ORGANIZATIONAL ID #, if any |
| | | | <input 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:

Description: PARCEL #33-07-306-003-0000 LOT 35 IN LYNWOOD TERRACE UNIT #1 E 1460 FT W 1710 FT S2 SW4 OF SEC07 T35N R15E 3P. Parcel ID: #33-07-306-003-0000

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

JEFFREY ELSNER
20073 CRESCENT AVE., LYNWOOD, IL, 60411-1513

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 30 years



S/P
P2
S/P
M/S
M/S