UNOFFICIAL COPY

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone:(800) 331-3282 Fax: (818) 6	662-4141	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	517247 ICITIZENS8	
UCC Direct Services P.O. Box 29071	7103470	·
Glendale, CA 91209-9071	ILIL FIXTURE	1



Doc#: 0607612030 Fee: \$26.50 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds

Date: 03/17/2006 10:35 AM Pg: 1 of 2

File With: Cook+, IL		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		
DEBTOR'S EXACT FULL LEGAL LAME - insert only one debtor na Ta. ORGANIZATION'S NAME OR	me (1a or 1b) - do not abbreviate or combin	ie names		
15 INDIVIDUAL'S LAST NAME VILLEGAS	FIRST NAME JUAN	MIDDLE NAME	SUFFIX	
2948 N. LONG	CHICAGO	STATE POSTAL CODE 60641	COUNTRY	
1d <u>SEE INSTRUCTIONS</u> ADD'L INFO RE 1e. TYPE OF ORGA IZATI) ORGANIZATION DEBTOR	N 1f. JURISDICTION OF ORGANIZATION	1g. ORGAN(ZATIONAL ID #, if any	y Noni	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only	one rehar name (2a or 2b) - do not abbrevi	iate or combine names		
2a. ORGANIZATION'S NAME	10			
2b. INDIVIDUAL'S LAST NAME	FIRS, NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY	
2d. <u>SEE INSTRUCTIONS</u> ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR	STATE OF STA	2g. ORGANIZATIONAL ID #, if any	, None	
B. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASS	SIGNOR S/P) - insert only one secured Jar	() ame (3a or 3h)		
33 ORGANIZATION'S NAME CITIZENS FINANCE COMPANY		14,		
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	M. TELE NAME	SUFFIX	
188 INDUSTRIAL DR STE 128	ELMHURST	STATE POSTAL CODE	COUNTRY	
. This FINANCING STATEMENT covers the following collateral:	.08.119.003.00	W 7		

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2 pg
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FINANCING STATEMENT ADDENDUNG FOLLOW INSTRUCTIONS (front and back) CAREFULLY	1			
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING ST	ATEMENT			
9a. ORGANIZATION'S NAME				
96 INDIVIDUAL'S LAST NAME VILLEGAS FIRST NAME JUAN	MIDDLE NAME, SUFFIX			
10. MISCELLANEOUS				
7103470-40-1				
517247 ICITIZENS8				
Villegas				
326-05-0875				
File with: Cook+, IL				
11. ADDITIONAL DEBTOR'S EXACT FULL 'LeG' - NAME - insert only	one name (11a or 11h) - do not a		DR FILING OFFICE USE ONLY	
11a. ORGANIZATION'S NAME	nume (11d of 11b) - do not a	bbreviate of Combine Hame	5	
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	MAME	
	FIRST NAME	MIDDLE	NAME SUFFIX	
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE COUNT	RY
11d SEE INSTRUCTION ADD'L INFO RE 11e. TYPE OF ORGANIZATIO.	11f. JURISDICTION OF ORGA	NIZATION 11a OF	RGANIZATIONAL ID #, if any	
ORGANIZATION DEBTOR	THE BURNES OF GROAD	Tig. Or	GANIZATIONALID#, IT any	NONE
12. ADDITIONAL SECURED PARTY'S OF ASSIGNOR S/P	la NORET	(10)	L	NONE
12a ORGANIZATION'S NAME	s NAME - instant only one name	(12a or 12b)		
DR 12b. INDIVIDUAL'S LAST NAME	45.			
120. MOTORORE S EAST NAME	FIRST NAME	MIDDLE	NAME SUFFIX	
12c. MAILING ADDRESS	CITY	STATE	POSTAL CODE COUNTR	RY
13. This FINANCING STATEMENT covers timber to be cut or as-extract collateral or is filed as a X fixture filing.	ted 16. Additional collateral descri	ption:		
collaterat or is filed as a X fixture filing.		7.0		-
14. Description of real estate:		0)	
Description: LOT 4 IN BLOCK 12 IN KENDALL'S BELMONT AND 56TH AVENUE SUBDIVISION OF				
SECTION 28 TOWNSHIP 40 NOTH, RANGE 13 EAST C	of	•		
THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY LLINOIS. Parcel ID: 13-28-119-023-0000			CO	
				//
				<i>A</i> 4 E
Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest);				
	17. Check <u>only</u> if applicable and	check only one hav		
		crieck <u>only</u> one box. stee acting with respect to prope	erty held in trust or Decedent's	Estate
	18. Check only if applicable and	check <u>only</u> one box.		
	Debtor is a TRANSMITTING			
		anufactured-Home Transaction ublic-Finance Transaction – effe		
	I ned at contrection with a P	ublic-rinance Transaction – effe	ctive 30 years	