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JCC FINANCING STATEMENT OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]		Doc#: 0702645031 Fee: \$26 Eugene "Gene" Moore RHSP Fee: \$1 Cook County Recorder of Deeds Date: 01/26/2007 12:23 Date:			
		~ ~ ~ ~ 0	1/26/2007 12:23	PM Pg: 1 of	
3. SEND ACKNOWLEDGMENT TO: (Name and Address)				3 . , 0,	
Please Return To:					
CT CORPORATION SYSTEM					
Attn: Matt McEwen			**		
208 S. LaSalle Street, Ste. 814					
Chicago, IL 60604					
0 1 1 0 0 0 0 1	_				
DEBTOR'S EXACT FULL 1. GA NAME-insert only one debtor name		OVE SPACE IS FC	R FILING OFFICE U	SE ONLY	
1a. ORGANIZATION'S NAME	THE OF THE PROPERTY OF CHANGING IN THE SE	······································			
Illinois Student Assistance C. mmission					
TE INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX	
MAILING ADDRESS	CITY		Ingerit cons		
500 West Monroe Street, Third Floor	Springfield	STATE	POSTAL CODE	COUNTRY	
SEE INSTRUCTIONS ADD'L INFO RE 18. TYPE OF OR BANIZATI		IL 1g. ORG	62704 ANIZATIONAL ID#, if any	USA	
ORGANIZATION Government	Illinois	1		7 No	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert on	one Jet or name (2a or 26) - do not abbreviate or	combine names			
2a. ORGANIZATION'S NAME	1				
R 25. INDIVIDUAL'S LAST NAME	FIL ST NAME	MIDDLE	NAME	ISUFFIX	
				30,71%	
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
	1/2x				
ADD'L INFO RE 20. TYPE OF ORGANIZATION	ON 21. JURISDICTION OF CAG / NIZATION	2g. ORG	ANIZATIONAL ID #, if any		
DEBTOR				NO	
SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGN 32. ORGANIZATION'S NAME	NOR S/P}-insertonly one secured party name. 3a or 3	36)			
SLM Education Loan Corp.	•	0.		•	
36. INDIVIDUAL'S LAST NAME	FIRST NAME	INIODI E	NAME	SUFFIX	
		1.0	1.0		
	CITY	S) (1)	POSTAL CODE	COUNTRY	
. MAILING ADDRESS C/o Sallie Mae, Inc., 11100 USA Parkway This FINANCING STATEMENT covers the following collateral:	Fishers	IN	460 7	USA	

Transfer Addendum is available upon written request to the secured party at the address set forth above.

	CONSIGNEE/CONSIGNOR BAILEE/BAILOR	SELLER/BUYER AG LIEN NON-UCCFILING
This FINANCING STATEMENT is to be filed [for record) (or recorded) in ESTATE RECORDS. Attach Addendum.	the REAL 7. Check to REQUEST SEARCH REPA	(grotional) All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	- //	
Cook County	Debtor's Authorization: X	my u =
FILING OFFICE COPY - UCC FINANCING STATEMENT (F	OPM (ICC4) (REV. OF/22/02)	ν

0702645031 Page: 2 of 2

			A) EN BUIL	CIAL (COI	PY	•	
9.1	LOWINSTRUCTIONS (front and back) CARE BTOR (1a OR 1b) (FULLY ON RELATED FINAN	ICIAL STATEMENT	-			
	98. organization's na Illinois Student A	ME			1			
OR	9b. INDIVIDUAL'S LAST N		FIRST NAME	MIDDLE NAME, SUFFIX				
10. [MISCELLANEOUS:	· · · · · · · · · · · · · · · · · · ·	<u> </u>		1			
11. /	ADDITIONAL DEBTOR	R'S EXACT FULL LEG	AL NAME — Insert only one	name (11a or 11b) – do not abbre			E IS FOR FILING OF	FICE USE ONLY
	11a. ORGANIZATION'S NA	ME	THE PARTY STREET, STRE	Figure (114 01 115) = 00 1101 805184	viate or combine har	nes	<u>.</u>	
OR	11b. INDIVIDUAL'S LAST	NAME .		FIRST NAME	·	MIDDLE NAME		SUFFIX
	MAILING ADDRESS	0		CITY		STATE	POSTAL CODE	COUNTRY
11d.	SEE INSTRUCTIONS	ADD'L INFO (E 118. T' ORGANIZATIO', DEBTOR	PE OF ORGANIZATION	11f. JURISDICTION OF ORGANI	ZATION	11g. ORGA	NIZATIONAL ID#, if a	ny
12.	ADDITIONAL SECU		ASSIGNOR S/P'S NA	ME – insert only gne name (12a	or 12b)	<u> </u>		Cinone
	12a. ORGANIZATION'S NA	ME						
OR	12b. INDIVIDUAL'S LAST N	AME	C	FIRST NAME		MIDDLE NAME		SUFFIX
12c.	MAILING ADDRESS		0,	CITY		STATE	POSTAL CODE	COUNTRY
14. [collateral, or is filed as a Description of real estate: Lot 3 in Arbortake Sections 5 and 6, East of the Third F plat thereof record Number 2747538; conveyed to the III	Centre, being a Township 42 No Principal Meridial led March 14, 19 (except the por linois State Toll Fee's Deed dated 15, 1991 as Dook County, Illinois 01-011, Vol. 131 DOK Rd. TOOK Rd. TOOMER of above-cord interest; to Central Mana on Center	subdivision in rth, Range 12, n, according to the 85 as Document tion thereof dighway Authority February 27, 1991 cument Number state	17. Check only if applicable and Debtor is a Trust or Trust. 18. Check only if applicable and Debtor is a TRANSMITTING	Check only if applicable and check only one box. Stor is a Trust or Trustae acting with respect to property held in trust or Decedent's Estate. Check only if applicable and check only one box.			
				Filed in connection with a N Filed in connection with a P				
FILIN	G OFFICE CORY - U	CC SINANCING STA	TEMENT ADDENDURA	(EORM HCC144) (DEV.			.Ture So years	

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