



Doc#: 0713610047 Fee: \$26.50 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds Date: 05/16/2007 11:20 AM Pg: 1 of 2

DR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names				
(1a or 1b) - do not abbreviate or combine r	names			
FIRST NAME	MIDDLE NAME	SUFFIX		
DESPLAINES	STATE POSTAL CODE 60016	COUNTRY		
1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any			
Cobton name (O O)		NON		
(2a or 2b) - do not abbreviate	or combine names			
10				
FIRST NAME	MIDDLE NAME SUFFIX			
CITY	STATE DOCTAL CORE			
17%	STATE POSTAL CODE	COUNTRY		
2f. JURISDICTION OF O'CANIZATION	2g. ORGANIZATIONAL ID#, if any			
NOR S/D)		NONE		
TON 3/P) - Insert only one secured Fart, na	me (3a or 3b)			
FIRST NAME	<b>T</b> '			
	M. DIPLE NAME	SUFFIX		
CITY	STATE POSTOL CODE	COUNTRY		
	FIRST NAME LUIS CITY DESPLAINES  1f. JURISDICTION OF ORGANIZATION  FIRST NAME  CITY  2f. JURISDICTION OF O'/CANIZATION  NOR S/P) - insert only one secured rarry name  FIRST NAME	FIRST NAME LUIS  CITY DESPLAINES  If. JURISDICTION OF ORGANIZATION  FIRST NAME  CITY  STATE FOSTAL CODE 60016  19. ORGANIZATIONAL ID #, if any  C ebfor name (2a or 2b) - do not abbreviate or combine names  FIRST NAME  MIDDLE NAME  CITY  STATE POSTAL CODE  2f. JURISDICTION OF O'CANIZATION  2g. ORGANIZATIONAL ID #, if any  NOR S/P) - insert only one secured rart, name (3a or 3b)  FIRST NAME  M. DI'LE NAME		

This FINANCING STATEMENT covers the following collateral:

RAINSOFT WATER SYSTEM Parcel ID: 09-15-105-002-0000

	SSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEF/BAILOR SELLE	
This FINANCING STATEMENT is to be filed [for ESTATE RECORDS. Attach Addendum 8. OPTIONAL FILER REFERENCE DATA	record] (or recorded) in the REAL lif applicable! 7. Check to REQUEST SEARCH REPORT(S) on Debt. [ADDITIONAL FEE] [Optional]	R/BUYER AG. LIEN NON-UCC FILING Ditor(s) All Debtors Debtor 1 Debtor 2
11104526	650080053	
FILING OFFICE COPY - NATIONAL UCC FINANC	CING STATEMENT (FORM UCC1) (REV. 05/22/02)	Prepared by HCC Birect Soniese C.C. B. 2007

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## **UNOFFICIAL COPY**

FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY						
9. NAME OF FIRST DEBTOR (1a or 1b) ON RE 19a. ORGANIZATION'S NAME		ENT				
	RST NAME LUIS	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS						
11104526-IL-31			<b>x</b> ,	-		
10656 PRIME ACCEPTAN			i			
650080053 File with: CC IL Cook+, IL			THE ABOVE SPA	CE IS FOR	: FILING OFFICE USE C	ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL 1 20	NAME - insert only one n	ame (11a or 11b) - do not	abbreviate or combin	e names		
11a. ORGANIZATION'S NAME						
OR 11b. INDIVIDUAL'S LAST NAME	0,5	FIRST NAME		MIDDLE N	NAME	SUFFIX
11c. MAILING ADDRESS	<u>C</u>	CITY		STATE	POSTAL CODE	COUNTRY
11d. SEE INSTRUCTION ADD'L INFO RE 11d ORGANIZATION DEBTOR	TYPE OF ORGANIZATION	11f. JURISDICTION OF OR	GANIZATION	11g. OR0	GANIZATIONAL ID #, if a	NONE
12. ADDITIONAL SECURED PARTY'S o	r ASSIGNOR S/P's N/	AME insert only one nam	ne (12a or 12b)			
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS		СПҮ	C	STATE	POSTAL CODE	COUNTRY
collateral or is filed as a X fixture filing.	r to be cut or as-extracted	16. Additional collateral de	4			
Description of real estate:  Description: LOT 2 IN BLOCK 2 IN IS SUBDIVISION OF THE WEST HALF NORTHEAST QUARTER OF THE N QUARTER OF SECTION 15 TOWNS RANGE 12 EAST OF THE THIRD PIN COOK COUNTY ILLINOIS PARC 09-15-105-002-0000. Parcel ID: 0	FOF THE ORTHWEST SHIP 41 NORTH, RINCIPAL MERIDIAN,			O,	ST.CO	
15. Name and address of a RECORD OWNER of above (if Debtor does not have a record interest):	ve-described real estate		and shock only and both			
		17. Check only if applicable  Debtor is a Trust or  18. Check only if applicable	Trustee acting with resp	ect to pro	perty held in trust or	Decedent's Estate
		Debtor is a TRANSMI			n effective 30 years	
		L_J	th a Public-Finance Trans			t Services, Inc., P.O. Bo