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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

Trisha Thomas (800)552-9869

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Citizens Finance CompanyAttn: UCC Division
188 Industrial Dr.
Suite 128
Elmhurst, IL & 0126

Doc#: 0828845061 Fee: \$40.25 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds
Date: 10/14/2008 09:57 AM Pg: 1 of 2

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

(11871301		<u> </u>		
- do not abbreviate or combine names				
FIRST NAME	MIDDLE NAME		SUFFIX	
Araceli	STATE	POSTAL CODE	COUNTRY	
	IL	60629	USA	
1f. JURISDICTION OF ORGANIZATION	1g. ORG			
Cook County			NONE	
e otor name (2a or 2b) - do not abbreviate or comb	ine names			
4				
FIRE (NAM)	MIDDLE NAME		SUFFIX	
СПУ	STATE	POSTAL CODE	COUNTRY	
21. JURISDICTION OF OP GA'NZATION	2g. OR	GANIZATIONAL ID#, if any	NONE	
P) - insert only <u>one</u> secured party name 3a or 3b)),			
FIRST NAME	MIDDLE	E NAME	SUFFIX	
CITY	S TA TE	POSTAL CODE	COUNTRY	
Elmhurst	IL	60126	USA	
	Araceli CITY Chicago 1f. JURISDICTION OF ORGANIZATION Cook County Enter Iname (2a or 2b) - do not abbreviate or comb FIRST NAME CITY Prinsert only one secured party name (3a or 3b) FIRST NAME	FIRST NAME Araceli CITY Chicago 1f. JURISDICTION OF ORGANIZATION 1g. ORG Cook County Stor name (2a or 2b) - do not abbreviate or combine names FIRST NAME MIDDLE 21. JURISDICTION OF OP SANIZATION 22. ORG Pinsert only one secured party name 3a or 3L) FIRST NAME MIDDLE CITY STATE	FIRST NAME Araceli CITY Chicago If, JURISDICTION OF ORGANIZATION Cook County Stor name (2a or 2b) - do not abbreviate or combine names FIRST NAME MIDDLE NAME STATE POSTAL CODE 2t. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any CITY STATE POSTAL CODE FIRST NAME MIDDLE NAME STATE POSTAL CODE MIDDLE NAME CITY STATE POSTAL CODE	

Purchase and Installation of a water treatment system.

4. In sillHANCING STATEMENT covers the following colleteral

5. AL FERNATIVE 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 [if applicable] To Check to REQUEST SEARCH REPORT(S) on Debtor(s) All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA
110-90826

FILING OFFICE COPY — UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02)

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UC	C FINANCING STATE	MENT ADDENDUM				
FOL	LOW INSTRUCTIONS (front and b	ack) CAREFULLY 1b) ON RELATED FINANCING STATI	EMENT			
	PAME OF FIRST DEBTOK (18 di	III) ON REPORTED				
ÐR	9b, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
	Renteria	Araceli				
10.	MISCELLANEOUS:					
	200	FULL SECAL NAME - insert only <u>one</u> na	ume (11a or 11b) - do not abbrevia		IS FOR FILING OFF	CE USE ONLY
11.	. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAIVIE - Insert only gire ha	inte (Tra or Frb) - de no. de s			
		$O_{\mathcal{R}}$	1	MIDDLE	NAME	SUFFIX
OF	11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDE	INAME	
11:	c, MAILING ADDRESS	<u> </u>	CITY	STATE	POSTAL CODE	COUNTRY
11:	SEE INSTRUCTIONS ADDIT INFO ORGANIZA DEBTOR	O'RE 11e TYPE OF ORGANIZATION 1	111 JURISDICTION OF ORGAN	IIZATION 11g. OF	RGANIZATIONAL ID#, If	any NONE
12	ADDITIONAL SECURED PA	RTY'S or ASSIGNOR S/P'S	NAL'E - insert only one name	(12a or 12b)		
12	12a, ORGANIZATION'S NAME					
Ó	12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDL	E NAME	SUFFIX
12	E. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
14	SOUTHEAST 1/4 OF THI SECTION 22 TOWNSHIF EAST OF THE THIRD PI COOK COUNTY, IL. 5. Name and address of a RECORD OW 60 Delitor does not have a record inter	NIBAL HEIGHTS, A NORTHWEST 1/4 OF THE E SOUTHEAST 1/4 OF 38 NORTH, RANGE 13 RINCIPAL MERIDIAN, IN	16. Additional collateral descri	ption:	O _E	
	ARACELI RENTERIA 6910 SOUTH KEDVALE CHICAGO, IL. 60629	EDVALE 17. Check only if applicable and check only one box.				