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Doc#: 0833119012 Fee: \$40.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 11/26/2008 09:06 AM Pg: 1 of 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
CSC DILIGENZ, INC. 1-800-858-5294

B. SEND ACKNOWLEDGMENT TO: (Name and Address)
38530997
PREPARED BY:
CSC DILIGENZ, INC.
6500 HARBOUR HEIGHTS PKWY, SUITE 400
MUKILTEO WA 98275

Filed In: Illinois Cook

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
HOLY CROSS HOSPITAL

OR

1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
2701 W. 68TH STREET CHICAGO IL 60629 USA

1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any
CORP. IL 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
PARK NATIONAL BANK

OR

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

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
801 NORTH CLARK STREET CHICAGO IL 60610 USA

4. This FINANCING STATEMENT covers the following collateral:

AS MORE FULLY DESCRIBED IN VENDOR QUOTATION/ORDER # AQ16/C3D AND VENDOR INVOICE TOSHIBA AQUILION 16 WHOLE BODY CT SCANNER, SERIAL # AGDD0813194, CT ACCESSORY KIT LONG COUCH 1800MM, CT PHANTOM, CONSOLE DESK, (2) CHAIRS WITH ADJUSTABLE ARMS AND BACK, (5) MEDIA FOR DVD-RAM DRIVE (9.4GB), CABLE CATEGORY 5E/RJ45 5M, CABLE CATEGORY 5E/RJ45 35M, (2) SERVICE MODEM CABLES, FLOORING LEVELING EPOXY KIT, DICOM MODALITY WORKLIST MANAGEMENT (MWM) SERVICE CLASS USER (SCU) SYSTEM SERIAL # 1BA0814928, PGP STUDY SPLIT SERIAL # 1BA0822225, CT FLUOROSCOPY, LCD MONITOR 15" FOR FLUOROSCOPY REMOTE VIEWING, NEEDLE HOLDER KIT FOR CT FLUOROSCOPY, CEILING SUSPENSION FOR FLAT PANEL MONITOR CMM-003E SERIAL # G76061, VITREA SYSTEM SOFTWARE SERIAL # 5070933434, WORKSTATION FOR VITREA SYSTEM SERIAL # 2UA7510QBT, LCD MONITOR 15" SERIAL # 1BC0823076, DICOM STORAGE SERVICE CLASS PROVIDER (SCP) SERIAL # 1BA07Z2889, DICOM PERFORMED PROCEDURE STEP SCU, DICOM QUERY/RETRIEVE SERVICE CLASS PROVIDER (SCP) SERIAL # 1BA0823018, DICOM QUERY/RECEIVE SCU AQ/MP 1BA07Z3188, POWER CONDITIONER / DISTRIBUTOR 125 KVA UNIVERSAL, ADVANCED CARDIAC CT COURSE FOR TECHNOLOGIST, DICOM PPS PC-CONSOLE SERIAL # 1BA0813356, LCD MONITOR 20" SERIAL # CNG72909NF, CT TRAINING, CT FLOURO FOR AQ16/8/4S PC SERIAL # 1BB0832348.

TOGETHER WITH: (I) ALL SUBSTITUTIONS FOR, AND PRODUCTS AND PROCEEDS OF ANY OF THE FOREGOING PROPERTY, (II) ALL ACCESSIONS THERETO; (III) ALL ACCESSORIES, ATTACHMENTS, PARTS, EQUIPMENT AND REPAIRS NOW OR HEREAFTER ATTACHED OR AFFIXED TO OR USED IN CONNECTION WITH ANY OF THE FOREGOING PROPERTY, (IV) ALL WAREHOUSE RECEIPTS, BILLS OF

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) (optional) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA
FIXTURE - 10261387-01 (ITEM NO. 01) **38530997**

54
M/KO
P/B
20
11/26/08

UNOFFICIAL COPY**UCC 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 HOLY CROSS HOSPITAL			
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

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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 INSTRUCTIONS	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 CSK GROUP, INC.					
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS 2 VENTURE, SUITE 210		CITY IRVINE	STATE CA	POSTAL CODE 92618	COUNTRY USA

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:
2701 WEST 68TH STREET
CHICAGO, IL 60629

SEE ATTACHMENT FOR LEGAL DESCRIPTION

16. Additional collateral description:

LADING AND ANY OTHER DOCUMENTS OF TITLE NOW OR HEREAFTER COVERING ANY OF THE FOREGOING PROPERTY, AND (V) ALL INSURANCE AND/OR OTHER PROCEEDS OF ANY TYPE OF THE FOREGOING PROPERTY.

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

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 Estate18. 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

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Legal Description of
Holy Cross Hospital
2701 W. 68th St
Chicago, IL 60629

PREIN 19-24-406-003 (formerly -001)

Blocks 5 and 6, except the East 150 feet of Block 6 and except the West 35 feet of the East 185 feet of the South 180 feet of Block 6, in Hirsh and Young's Subdivision of the Northwest 1/4 of the Southeast 1/4 of Section 24, Township 38 North, Range 13, East of the Third Principal Meridian;

ALSO

Vacated part of South Fairfield Avenue East of adjoining the E line of Blk 5 and W of and adjoining the W line of Blk 6, in Hirsh and Young's Subdivision of the NW 1/4 of the SE 1/4 of Section 24, Township 38 North, Range 13, East of the Third Principal Meridian; that part of said street being otherwise commonly described as that part of South Fairfield Avenue between the South line of West 68th Street and the North line of West 69th Street in Chicago, Illinois.