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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)
LOAN SERVICING 800-755-8015

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

FIRST MUTUAL BANK
PO BOX 1647
BELLEVUE, WA 98009-1647

Doc#: 0904819073 Fee: \$38.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 02/17/2009 01:59 PM Pg: 1 of 2

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			
~/ _X		INDOCE NAME	ISUFFIX
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	10011111
COLLINS	MAE	1	
	CITY	STATE POSTAL CODE	COUNTRY
16. MAILING ADDRESS 9811 S MARYLAND AVENUE	CHICAGO	IL 60628	
TO THE PERSON NAMED IN COLUMN 19	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any	
1d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR			NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one de	or ame (2a or 2b) - do not abbreviate or combine r	names	
2. ADDITIONAL DEBTOR'S EXACT FOLE LEGAL IN MILE 28. ORGANIZATION'S NAME			
Za. ORGANIZATION G TANILE		_	
OR INDIVIDUAL STAST NAME	TFIRST NAME	MIDDLE NAME	SUFFIX
OR 2b. INDIVIDUAL'S LAST NAME	0,		
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
2C. MAILING ADDRESS	1/)*	1 1	
TO THE DE LOS TYPE OF OPCANIZATION	2f. JURISDICTION OF OF GA' AZATION	2g. ORGANIZATIONAL ID #, if any	
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION		•	NONE
DEBTOR			
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only one secured party na. > (3a /r 3b)		
3a. ORGANIZATION'S NAME FIRST MUTUAL BANK		02/09/09	
	FIRST NAME	MIDDLE NAME	SUFFIX
OR 3b. INDIVIDUAL'S LAST NAME	PIRST NAME	1.0	
	CITY	STATE CODE	COUNTRY
3c. MAILING ADDRESS	****	WA 98009-1647	}
PO BOX 1647	BELLEVUE		

4. This FINANCING STATEMENT covers the following collateral:

FOUNDATION REPAIR

PARCEL ID: 25-11-119-004-0000

LEGAL: LOT 4 IN BLOCK 4 IN COTTAGE GROVE HEIGHTS BEING A SUBDIVISION OF PARTS OF THE NORTH 1/2 OF SECTION 10 AND SECTION 11, TOWNSHIP 37 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

SITUATE IN THE COUNTY OF COOK, STATE OF ILLINOIS

FIXTURE FILING ☑

ADDRESS: 9811 S MARYLAND AVENUE, CHICAGO, IL 60628

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNE	SINOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING K to REQUEST SEARCH REPORT(S) on Debtor(s) All Debtors Debtor 1 Debtor 2
FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT (FORM UCC	C1) (REV. 07/29/98)

0904819073 Page: 2 of 2

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NAME OF FIRST DEBTOR (1a or 1	ack) CAREFULLY b) ON RELATED FINANCING STAT	EMENT				
9a, ORGANIZATION'S NAME						
Ĺ		MIDDLE NAME, SUFFIX				
96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SOFFIX				
COLLINS	MAE					
MISCELLANEOUS:		ì				
200						
%				ODACE I	S FOR FILING OFFIC	FUSE ONLY
	-//x				S FOR FILING OF IC)
1. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only one n	ame (11a or 11b) - do not abbrevi	ate or combine name	95		
11a. ORGANIZATION'S NAME	0.0					
		FIRST NAME		MIDDLE I	NAME	SUFFIX
11b. INDIVIDUAL'S LAST NAME				4		
		CITY		STATE	POSTAL CODE	COUNTRY
11c. MAILING ADDRESS						
11d TAX ID# SSN OR FIN ADD'L INF	O RE 11e. TYPE OF ORGANIZATION	1 1f. JURISDICTION OF ORGA	NIZATION	11a, ORC	SANIZATIONAL ID #. if a	
ORGANIZA DEBTOR						
T acqueen 0/	ARTY'S or ASSIGNOR S/P'S	NAME - in Jert, only one name	(12a or 12b)			
12. ADDITIONAL SECURED PA	1((1) <u>0</u>					
, Lui Silva di Carantina di Car				IMIDDLE	NAME	SUFFIX
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	·	MIDDLE	NAME	001711
				STATE	POSTAL CODE	COUNTR
12c. MAILING ADDRESS		CITY				
		Lo como de Hataral dano	vinting:			
13. This FINANCING STATEMENT covers		16. Additional collateral desc	ripuon.			
collateral, or is filed as a	filing.			7		
14. Description of real estate.		LEGAL: LOT 4 IN	I BLOCK 4 II	V COT-	FAGE GROVE	HEIGHTS
TO THE PERMIT		DEINO A CURDIN	VISION OF F	DARTS.	OF THE NORT	H I/Z UF
FOUNDATION REPAIR	204 0000	TOTALION 10 AN	n seculon	11. IU	יעו זכ חוד סר ועי	∵ ! ₹ ! 1 ! ;
PARCEL ID: 25-11-119-	J04-0000	RANGE 14 EAST	OF THE TH	HRD P	RINCIPAL MEF	RIDIAN, IN
ADDRESS: 9811 S MAR	RYLAND AVENUE.	COOK COUNTY	, ILLINOIS.		'C -	
CHICAGO, IL 60628	······································				NA OTATE OF	II I IMOIS
CHICAGO, IL 00020		SITUATE IN THE	E COUNTY (OF COO	JK, STATE OF	ILLINOIS
		Ļ				
15. Name and address of a RECORD C	WNER of above-described real estate					
(if Debtor does not have a record int	erest):					
			aboek only ser	a hox		
		17. Check only if applicable	e and check only on	, wux. ith reenant t	o property held in trust	or Decedent
					o proporty care in a ser	
		18. Check only if applicabl		. von.		
		Debtor is a TRANSMIT	TING UTILLLY	nme Transa	ction — effective 30 year	S
		Filed in connection wit	n a Manulactured-H	21110 TERRISO		
		Filed in connection wit	u - Dublin Di 7	rangartion .	— effective 30 years	