## FFICIAL CC

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (optional) Mark: Laskowski B. SEND ACKNOWLEDGMENT TO: (Name and Address) Mark: Laskowski (without prejudice) 5N758 Rochefort Lane (non-domestic) Wayne [60184] Illinois

Doc#: 0914649084 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds

Date: 05/26/2009 02:32 PM Pg: 1 of 3

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

<u> </u>			THEADO	7 C (17 (4 m · ) · )		
L DEDTODIC SYNCT CH	LL EC L NAME	insect only one debtor name (1a o	r 1b) - do not abbreviate or combine names			
	THE STATE OF THE S			OOK		
1a. ORGANIZATION'S NAME UNITED NATIONS, UNITED STATES, STATE OF OR 1b. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE	MIDDLE NAME	
			CITY	STATE	POSTAL CODE	COUNTRY
1c. MAILING ADDRESS 207 STATE HOUS	SE	Ox	SPRINGFIELD	IL	62706	USA
1d. TAX ID #: SSN OR EIN		1e. TYPE OF ORGANICATION  CORPORA TION	16. JURISDICTION OF ORGANIZATION FEDERAL	1g. ORG/	ANIZATIONAL ID#, if any	NONE
DERTOE			ebtor name (2a or 2b) - do not abbreviate or o	combine names		
2a, ORGANIZATION'S NA	ME		Z			
OR 2b. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE	MIDDLE NAME	
2c, MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
P.O. Box 1820			Newarl	NJ	07101	USA
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	29. TYPE OF ORGANIZATION CORPORATION	21. JURISDICTION OF C. RGANIZATION FEDERAL	2g. ORG	ANIZATIONAL ID#, if any	NONE
2 SECURED PARTY'S		OF TOTAL ASSIGNEE OF ASSIGNOR	R S/P) - insert only one secured party r me (.	a or 3b)		
3a. ORGANIZATION'S N						
OR 3b INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE	NAME	SUFFIX
Laskowski			Mark	4/		
3c. MAILING ADDRESS			CITY	STOF	60184	USA
5N758 Rochefort Lane			Wayne	192		

4. This FINANCING STATEMENT covers the following collateral:

NOTICE: In accordance with U.S.C. 47 - Property - This is the entry of the Debtor in the Commercial Registry as a transmitting utility and the following property is hereby registered in the same as public notice of a commercial transaction; Deed of Trust recorded as Docket # 0531847025 (Mortgage \$102,200) released by Docket # 0904448011 (Notice of Reconveyance); U.C.C. Contract Trust Account # (RA 446 485 655 US): All property is accepted for value and is exempt from Levy. Adjustment of the filing is from Public Policy HJR-192, Public Law 73-10 and U.C.C. 10-104. All proceeds, products, accounts, fixtures and the orders therefrom are released to the the Secured Party (Mark: Laskowski).

This is actual Constructive Notice that all of Debtor's interest now owned or hereafter acquired is hereby accepted as collateral for securing contractual obligation in favor of the Secured Party as detailed in a true, complete, authorized Security Agreement in the possession of the Secured Party.

FINANCING, AMERICA'S SERVICING COMPANY, ORGANIZATION/TRADE NAME/TRADEMARK - DEBTOR

L moore room	CONSIGNEE/CONSIGNOR BAILEE/BAILOR	SELLER/BUYER A	G. LIEN NON-UCC FILING
	CONDICITED SOLITOR	RT(S) on Debtor(s)	Debtor 1 Debtor 2
ALTERNATURE DESIGNATION (in physics of the filed for record) (or recorded ESTATE RECORDS. Attach Addendum.	[if applicable] [ADDITIONAL FEE]	[optional] All L	
8. OPTIONAL FILER REFERENCE DATA			
Secured Party: Mark: Laskowski			

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## **UNOFFICIAL COPY**

UCC FINANCING STA	TEMENT ADDENDUM			
TO LOW INCTRHCTIONS (front at	nd back) CAREFULLY a or 1b) ON RELATED FINANCING ST.			
THE PARTY OF THE P				
1 DUTED NATIONS	INITED STATES, STATE OF	LLINOIS, COUNTY		
OROR	FIRST NAME	MIDDLE NAME, SUFFIX		
9b. INDIVIDUAL'S LAST NAME				
10. MISCELLANEOUS:				
		THE	ABOVE SPACE IS FOR FILING OF	FICE USE ONLY
11, ADDITIONAL DEBTOR'S EX	CACT FULL LF JAL NAME - insert only on	e name (11a or 11b) - do not abbreviate or corr	nbine names	
11a. ORGANIZATION'S NAME	5			
OR 11b. INDIVIDUAL'S LAST NAME	- Ox	FIRST NAME	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS		СПУ	STATE POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR EIN ADD'I	LINFO RE 11e. TYPE OF ORGANIZATIO	111. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #,	if any NONE
DEBT	OR	P'S NALE - ins art only one name (12a or 12	2h)	
12. ADDITIONAL SECURED	D PARTY'S or ASSIGNOR S/	PS NAT IE - ITS STORY QUE HARTIE (124 OF 1)		
12a, ORGANIZATION S NAME		0,		Carrent
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
12c. MAILING ADDRESS		СПУ	STATE POSTAL CODE	COUNTRY
This FINANCING STATEMENT collateral, or is filed as a late.  14. Description of real estate.	overs timber to be cut or as-extracture filing.	led 16. Additional collateral descriptic 1:	OH'S	
			Office	
15. Name and address of a RECOF (if Debtor does not have a recor	RD OWNER of above-described real estate of interest):			
		17. Check only if applicable and check	k <u>only</u> one box.	t or Decedent's Estat
		Debtor is a Trust or Trustee  18. Check only if applicable and check	acting with respect to property held in trus	Davedent's Esta
		18. Check only if applicable and check  Debtor is a TRANSMITTING UTILI		
		Filed in connection with a Manufa	ctured-Home Transaction — effective 30 ye	ars
		Filed in connection with a Public-	Finance Transaction — effective 30 years	

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## **UNOFFICIAL COPY**

ORDER NO.: 1301 - 000268890 ESCROW NO.: 1301 - 000268890

STREET ADDRESS: 14404 S. CALHOUN

CITY: CHICAGO

**ZIP CODE:** 60633

**COUNTY: COOK** 

TAX NUMBER: 29-01-411-056

LEGAL DESCRIPTION:

DOOP OF COOK LOT 27 IN BLOCK 3 IN THE RESUBDIVISION OF CALUMET BRIDGE ADDITION A SUBDIVISION OF THE SOUTHEAST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 1, TOWNSHIP 36 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, AS PER PLAT OF SAID RESUBDIVISION RECORDED OCTOBER 16, 1925 AS DOCUMENT 906777 AS MODIFIED BY CERTIFICATE AND PLAT OF CORRECTION RECORDED NOVEMBER 25, 1927 AS DOCUMENT 9852084 IN COOK COUNTY, ILLINOIS. Clart's Original