

UNOFFICIAL COPY



Doc#: 0917619022 Fee: \$38.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 06/25/2009 10:07 AM Pg: 1 of 2

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
PAULA VANBIBBER 812-475-4278

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

AMERICAN GENERAL FINANCIAL SERVICES OF ILLINOIS, INC.  
600 N. ROYAL AVE  
EVANSVILLE, IN 47715

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

OR

1b. INDIVIDUAL'S LAST NAME: FLYNN  
FIRST NAME: JERRY  
MIDDLE NAME: W  
SUFFIX:

1c. MAILING ADDRESS: 2735 W 97TH ST  
CITY: EVERGREEN PARK  
STATE: IL  
POSTAL CODE: 60805  
COUNTRY:

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

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  
AMERICAN GENERAL FINANCIAL SERVICES OF ILLINOIS, INC.

OR

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

3c. MAILING ADDRESS: 600 N. ROYAL AVE  
CITY: EVANSVILLE  
STATE: IN  
POSTAL CODE: 47715  
COUNTRY:

4. This FINANCING STATEMENT covers the following collateral:

DOORS, SIDING AND WINDOWS  
INSTALLED BY EVERGREEN DOOR & WINDOW  
AT 2735 W 97TH ST  
24122150110000  
NE4 S12 T37N R13E 3P LOT 133 Sub FRANK DeLUGACH Beverly, VISTA

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. See Instruction Debtor(s)

8. OPTIONAL FILER REFERENCE DATA

E  
S-1  
MNO  
P2  
4-11

**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

OR

9b. INDIVIDUAL'S LAST NAME

FLYNN

FIRST NAME

JERRY

MIDDLE NAME, SUFFIX

W

**10. MISCELLANEOUS:****THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY****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.

ADD'L INFO RE  
ORGANIZATION  
DEBTOR

11e. TYPE OF ORGANIZATION

11f. JURISDICTION OF ORGANIZATION

11g. ORGANIZATIONAL ID#, if any

 NONE**12.  ADDITIONAL SECURED PARTY'S or  ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)**

12a. ORGANIZATION'S NAME

OR

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

12c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

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:

24122150110000  
NE4 S12 T37N R13E 3P LOT 133  
COOK

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

16. Additional collateral description:

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 Public-Finance Transaction — effective 30 years