

# UNOFFICIAL COPY



1224217081

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

Doc#: 1224217081 Fee: \$40.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 08/29/2012 02:02 PM Pg: 1 of 2

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 662-4141	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	116406 JULES AND ASS
CT Lien Solutions	34519248
P.O. Box 29071	IL IL
Glendale, CA 91209-9071	FIXTURE
File with: CC IL Cook, IL	

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 NORTH SUBURBAN YOUNG MEN'S CHRISTIAN ASSOCIATION				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 2705 TECHNY RD.		CITY NORTHBROOK	STATE IL	POSTAL CODE 60062
COUNTRY USA				
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICTION OF ORGANIZATION IL	1g. ORGANIZATIONAL ID #, if any 44867664
<input type="checkbox"/> 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
<input type="checkbox"/> 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 TCF EQUIPMENT FINANCE, INC.				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 11100 WAYZATA BLVD. SUITE 801		CITY MINNETONKA	STATE MN	POSTAL CODE 55305
COUNTRY USA				

4. This FINANCING STATEMENT covers the following collateral:

Furnish and installation of light fixture package and materials: Lighting and Retrofit the facility as described on Schedule No. 4 of Master Equipment Lease Agreement No. 20070453 ALONG WITH ALL ADDITIONS, SUBSTITUTIONS, ATTACHEMENTS, REPLACEMENTS AND ACCESSIONS THEREOF, PLUS THE PROCEEDS OF ALL THE FOREGOING INCLUDING AMOUNTS PAYABLE UNDER ANY INSURANCE POLICY. THE FOREGOING EQUIPMENT IS ON LEASE TO THE ABOVE NAMED LESSEE (DEBTOR). THIS FILING IS FOR INFORMATIONAL PURPOSES ONLY. THIS IS A FIXTURE FILING. THIS FINANCING STATEMENT IS TO BE RECORDED IN THE REAL ESTATE RECORDS OF THE COUNTY RECORDER. LEGAL DESCRIPTION AS FOLLOWS: THE EAST 289.0 FEET OF THE WEST 816.0 FEET OF THE SOUTH 452.55 FEET OF THE NORTH 485.55 FEET OF LOT 12 IN SCHOOL TRUSTEES SUBDIVISION OF SECTION 16, TOWNSHIP 42 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

SPS MSC  
K N N X Y  
K N N X Y  
K N N X Y  
K N N X Y

5. ALTERNATIVE DESIGNATION (if applicable)	<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (if applicable)		[ADDITIONAL FEE] (optional)			
8. OPTIONAL FILER REFERENCE DATA		<input type="checkbox"/> All Debtors		<input type="checkbox"/> Debtor 1		<input type="checkbox"/> Debtor 2

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## 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 <b>NORTH SUBURBAN YOUNG MEN'S CHRISTIAN ASS</b>		
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME
		MIDDLE NAME, SUFFIX

10. MISCELLANEOUS  
**34519248-IL-31**

**116406 JULES AND ASS**

File with: CC IL Cook, IL    20070457-4    8/23/12

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
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11d. SEE INSTRUCTION    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
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13. This FINANCING STATEMENT covers  timber to be cut or  as-extracted collateral or is filed as a  fixture filing.

16. Additional collateral description:

14. Description of real estate:  
Description: THE EAST 289.0 FEET OF THE WEST 816.0 FEET OF THE SOUTH 452.55 FEET OF THE NORTH 485.55 FEET OF LOT 12 IN SCHOOL TRUSTEES SUBDIVISION OF SECTION 16, TOWNSHIP 42 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. Parcel ID: 04-16-300-008

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

**Northbrook Bank & Trust**  
1100 Waukegan Road, Northbrook, Illinois, 60062

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 Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY

Filed in connection with a Manufactured-Home Transaction

Filed in connection with a Public-Finance Transaction

