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		المسادية المستدينة ا المستدينة المستدينة								
UCC FIN	IANCING	STATEME	NT		Doc#: 1233322025 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee:\$10.00					
A. NAME &	PHONE OF CO	S (front and back ONTACT AT FILER ATOR (813	optional]		Eugene "Gene" Moore Andr 1 coloreds Cook County Recorder of Deeds Date: 11/28/2012 09:44 AM Pg: 1 of 2					
	- ISPC 1115 GUI	MENT TO: (Name a	E 100	THI	E ABOVE SPACE	E IS FOR FILII	NG OFFICE USE ONL	Y		
			ME – insert only <u>one</u> debtor nar	ne (1a or 1b) - do not abbreviate or	combine names					
OR 11	a. ORGANIZA b. INDIVIDUAL FARROW	I'S LAST NAME		FIRST NAME ELIZABETH	MIDDLE	MIDDLE NAME				
1c. MAILIN	1c. Mailing Address 15636 117TH AVE			ORLAND PARK	STATE IL	604675804	COUNTRY			
1d. TAX ID #	1d. TAX ID # : SSN OR EIN ADD'L INFO RE CRGANIZATION CEBTOR			1f. JURISDICTION OF ORGANIZ	1g. OR	ganizational ID#,	if any NONE			
2c. MAILIN 15636	26. MAILING ADDRESS 15636 117TH AVE			FIRST N ME CITY ORLAND PAP'A	STATE IL	POSTAL CODE 60467580 4 RGANIZATIONAL ID #	SUFFIX COUNTRY US			
	# : SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF OR (AN			(GANIZATIONAL ID#,	NONE		
[3	3a. ORGANIZA	S NAME (or NAME ATION'S NAME	of TOTAL ASSIGNEE of ASSI	GNORE S/P) – insert only <u>one</u> secur	red portvinama (3a	a or 3b)				
OR	ISPC 3b. INDIVIDUAL'S LAST NAME			FIRST NAME	M., DLE NAM	TO BLE NAME SUFFIX				
	NG ADDRESS GUNN HV	NY STE 100		ODESSA	=:::			COUNTRY		
		TEMENT covers the					Co	Jes No- yes Ju		
5. ALTERN FILING	NATIVE DESIG	NATION(if applicable)	LESSEE/LESSOR CC	NSIGNEE/CONSIGNOR BAILE	E/BAILOR S	ELLER/BUYE	R 🔲 AG. LIEN 🔲 I	NON-UCC		
REAL ESTA	ATE RECORDS. A	Attach Addendum [if ap	for record] (or recorded) in the plicable	7. Check to REQUEST SEARCH REPO ADDITIONAL FEE]	DRT(S) on Debtor(s) [optional]		All Debtors Debto	r 1 Debtor 2		
8. OPTIO	NAL FILER RE	FÉRENCE DATA COOK,	IL ISPC FILE#	<u>1034663</u>			ā.			

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	FINANCING STATI]						
	OF FIRST DEBTOR (1a or 1b) ON REL			1				
	38. OROMNEATION NAME							
OR	9b. INDIVIDUAL'S LAST NAME FARROW	FIRST NAME ELIZABETH	MIDDLE NAI	ME, SUFFIX				
10. MIS	CELLANEOUS:	·			1			
COC	PK, IL ISPC F	FILE # <u>1034663</u>			•			
FILI	NG OFFICE COPY ~ UCC FINANCING	A EMENT (FORM UCC1)(REV	⁷ . 05-22-02)		THE ABOVE SPACE IS	FOR FILING (OFFICE USE ONLY	
11. ADD	ITIONAL DEBTOR'S EXACT FULL LEG.	NAME – insert only <u>one</u> debtor	name (11a or	11b) do not abbro	eviate or combine names			
	TRA, ORGANIZATION STVANIE	9						
OR -	11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX	
11c. MAILING ADDRESS 15636 117TH AVE				ORLAND PARK		STATE	POSTAL CODE 60467580 4	COUNTRY US
11d. TA	X ID # : SSN OR EIN ADD'L INFO RE ORGANIZATIO DEBTOR		/ flor.	11f. JURISDIC	TION OF ORGANIZATION	11g. ORC	GANIZATIONAL ID#,	if any NONE
12.	ADDITIONAL SECURED PARTY'S or	ASSIGNOR S/P'S NAME - in	sert only one d	ebto, name (12a o	r 12b)			
İ	12a. ORGANIZATION'S NAME			TO,				
OR -	OR 12b. INDIVIDUAL'S LAST NAME			FIRST NAME N			ME .	SUFFIX
12c. MAILING ADDRESS				CITY		STATE	POSTAL CODE	COUNTRY
PAR	ateral, or is filed as a fixture filing. cription of real estate: RCEL ID, 27 18 307 011 (•	2/	ditional collateral d	lescription:	P		
LOTS 361-362 IN FRANK DE LUGACH'S WOODED ESTATES SUB'D IN THE SW 1/4 OF THE SE 1/4 OF SEC 18 TWP 36 N RGE 12 EAST OF THE 3 RD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS							Tico	
(if D ELIZ 1563	e and address of a RECORD OWNER of ebtor does not have a record interest): ABETH FARROW 6 117TH AVE AND PARK, IL 604675804	above-described real estate	Debtor 18. Ch	is a Trust or ack <u>only</u> if applicab ebtor is a TRANSM les in connection v	ole and check only one box.	Fransaction e	effective 30 years	ecedent's Estate