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Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 04/16/2014 10:15 AM Pg: 1 of 2

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional) angelamarie_j@yahoo.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Angela Etherly c/o 16826 Head Avenue Hazel Crest, Illinois 60429

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
OR				
1b. INDIVIDUAL'S SURNAME ETHERLY		FIRST PERSONAL NAME ANGELA	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 16826 HEAD AVENUE		CITY HAZEL CREST	STATE IL	POSTAL CODE 60429
COUNTRY				

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
COUNTRY				

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
OR				
3b. INDIVIDUAL'S SURNAME Etherly		FIRST PERSONAL NAME Angela	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 16826 Head Avenue		CITY Hazel Crest	STATE IL	POSTAL CODE 60429
COUNTRY USA				

4. COLLATERAL: This financing statement covers the following collateral:

The following property is accepted for value, exempt from Levy, and herewith registered in the commercial Chamber and liened at a sum certain at \$120,000.00 and is the private property of the Debtor of which the Secured Party holds all interest as the Authorized Representative and Attorney-In-Fact of the Debtor, and the property is described as: A lot/acres/etc., with a dwelling located at: 16826 Head Avenue Hazel Crest, Illinois 60429. Said property is recorded in the Official Record Book as amended, Public Records of Cook County, State of Illinois, Parcel ID# 29-30-111-019-0000, any Homestead description, allodial land title description and the legal description as follows: LOT 24 IN BLOCK 12 IN HAZEL CREST PARK A DIVISION OF THE NORTH 1/2 OF THE NORTHEAST 1/4 OF SECTION 30, TOWNSHIP 36 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

COMMONLY KNOWN AS: 16826 Head Avenue Hazel Crest, Illinois 60429 - Tax ID # 29-30-111-019-0000

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:
 Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:
 Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
Secured Party: Angela Etherly Date: 4/9/14

Certified Mail # 7011 2000 0000 6846 3099

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME

ETHERLY

FIRST PERSONAL NAME

ANGELA

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

Before the property can be seized, sold, forfeited, transferred, surrendered, conveyed, disposed of or otherwise removed from Debtors possession. Secured party must be satisfied in full via Bill of Exchange at \$120,000.00. Record owner is not the guarantor or surety to any explicit reservation. This filing is supported by: HJR-192, UCC 1-104, 10104, and "The One People's Public Trust" All proceeds, products, accounts, baggage, fixtures and the Orders there-from are to be released to the Debtor. Said filing establishes a Superior Security Interest and lien on the property as a matter of right under necessity.

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

17. MISCELLANEOUS: