

# UNOFFICIAL COPY

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS



Doc#: 1501516038 Fee: \$40.00  
RHSP Fee: \$9.00 RPRF Fee: \$1.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 01/15/2015 02:26 PM Pg: 1 of 2

A. NAME & PHONE OF CONTACT AT FILER (optional)	
Kathy Pearson (801) 747-7161	322773
B. EMAIL CONTACT AT FILER (optional)	
kpearson@medallion.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
MEDALLION BANK 1100 EAST 6600 SOUTH, SUITE 510 SALT LAKE CITY, UT 84121 FILED IN: COOK,IL	

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	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
Wanke	Gary	Edward			
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
5275 Birchbark Dr		Hoffman Estates	IL	60192	USA

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		
Wanke	Linda	L			
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
5275 BIRCHBARK DR		Hoffman Estates	IL	60192	USA

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					
MEDALLION BANK					
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
1100 EAST 6600 SOUTH, STE 510		SALT LAKE CITY	UT	84121	USA

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

WINDOWS AND DOORS - Fixture Filing

THE FOLLOWING PROPERTY IS SITUATED IN HOFFMAN ESTATES, COUNTY OF COOK, STATE OF ILLINOIS TO WIT: BRIDLEWOOD FARM 03 LOT 152 SEC 04 T41 R9E HANOVER TWP PROPERTY ADDRESS: 5275 BIRCH BARK DR, HOFFMAN ESTATES, IL 60192 PARCEL ID#: 06-04-201-017-0000

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:

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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	
Wanke	
FIRST PERSONAL NAME	
Gary	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Edward	

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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
					USA

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):

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):

Owners: Gary Edward Wanke , Linda L Wanke

16. Description of real estate:

THE FOLLOWING PROPERTY IS SITUATED IN HOFFMAN ESTATES, COUNTY OF COOK, STATE OF ILLINOIS TO WIT: BRIDLEWOOD FARM 03 LOT 152 SEC 04 T41 R9E HANOVER TWP PROPERTY ADDRESS:5275 BIRCH BARK DR, HOFFMAN ESTATES, IL 60192 PARCEL ID#: 06-04-201-017-0000

17. MISCELLANEOUS: