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1521919160

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

Doc#: 1521919160 Fee: \$40.00

RHSP Fee: \$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds

Date: 08/07/2015 11:53 AM Pg: 1 of 2

A. NAME & PHONE OF CONTACT AT FILER (optional)		345014
Connie Sorenson (801) 747-7713		
B. EMAIL CONTACT AT FILER (optional)		
csorenson@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		
Giczkowski	William	R			
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
11 Cranberry Ct		Streamwood	IL	60107	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		
Giczkowsky	Marilena				
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
11 Cranberry Ct		Streamwood	IL	60107	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 STREAMWOOD, COUNTY OF COOK, STATE OF ILLINOIS TO WIT: MARQUETTE WOODS LOT 24 SEC 27 T41 R9E HANOVER TWP PROPERTY ADDRESS: 11 CRANBERRY CT, STREAMWOOD, IL 60107 PARCEL ID#: 06-27-412-008-0000

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:

6b. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility 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:

Handwritten notes and signatures on the right side of the page, including 'y/p', '2', 'N', 'N', 'y/p', 'y/p', and 'F/M'.

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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

Giczkowski

FIRST PERSONAL NAME

Wiliam

ADDITIONAL NAME(S)/INITIAL(S)

R

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

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: Wiliam R Giczkowski , Marilena Giczkowski

16. Description of real estate:

THE FOLLOWING PROPERTY IS SITUATED IN
STREAMWOOD, COUNTY OF COOK, STATE OF ILLINOIS
TO WIT: MARQUETTE WOODS LOT 24 SEC 27 T41 R9E
HANOVER TWP PROPERTY ADDRESS: 11 CRANBERRY
CT, STREAMWOOD, IL 60107 PARCEL ID#: 06-27-412-008-
0000

17. MISCELLANEOUS: