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				Doc#; 15316 RHSP Fee:\$9.00 Karen A.Yarbrou

615036 Fee: \$40.00 ) APRF Fee: \$1.00

Cook County Recorder of Deeds

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS		Date: 1	1/12/2015 10:59 AM	Pg: 1 of 2
A. NAME & PHONE OF CONTACT AT FILER (optional)  Customer Service, 214-488-3200				
B. E-MAIL CONTACT AT FILER (optional)  CSR@FCCFINANCE.COM				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
FCC FINANCE, LLC P.O. BOX 795489	7			
DALLAS, TX 75279-5489				
	THE AS	IQVE SPACE IS FO	OR FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide onlyPouter name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of iten 1 clark, check here and provide	name; do not omit, modify, or abbreviate the Individual Debtor Information in item	any part of the Debto 10 of the Financing St	r's name); if any part of the I atement Addendum (Form U	ndividual Debtor ICC1Ad)
1a. ORGANIZATION'S NAME				
1b. INDIVIDUAL'S SURNAME  MAXWELL	FIRST PERSONAL NAME  LARRY	ADDITIO B	INAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 7331 S SANGAMON ST	CHICAGO	STATE IL	60621	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact rull name will not fit in line 2b, leave all of item 2 blank, check here and provide	i ame; do not omit, modify, or abbreviate the individual Debtor information in item	any part of the Debto 10 of the Financing St	r's name); if any part of the I tatement Addendum (Form t	ndividual Debtor JCC1Ad)
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PE (SO JAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
OVERTON	SHANNON	<b>D</b>		
2c. MAILING ADDRESS 7331 S SANGAMON ST	CHICAGO	STATE IL	60621	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED	URED PARTY): Provide only one Secure	Party name (3a or 3	b)	
38. ORGANIZATION'S NAME  DB HIL 2014 TRUST		6		
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P.O. BOX 795489	DALLAS	STATE TX	POSTAL CODE	COUNTRY

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

PFL (THERMOFOIL) CABINET DOORS, STYLE MARINA, COLOR WILD CHERRY, HARD WARE MODEL # P25965C-SN-C. PFL FLAT NO BEADED LINE DRAWER FRONTS, HARDWARE MODEL # PNP of 4H-SNC. MOLDING ABOVE CABINETS, MATCHING TOE KICKS, & TILT TRAY UNDER SINK. REPLACE 4 EXISTING DRAWERS W/ 9 PLY MAPLE PLYWOOD DRAWERS W/ STANDARD 3/4 EXTENSION GLIDES.

**ORIGINAL LOAN AMOUNT: \$4,335.00** 

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/Buy	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	
61991	

1531615036 Page: 2 of 2

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because Individual Debtor name did not fit, check here	nancing Statement; if line 16 was left blank			
9a. ORGANIZATION'S NAME				
96. INDIVIDUAL'S SURNAME  MAXWELL				
FIRST PERSONAL NAME  LARRY				
ADDITIONAL NAME(S)/IN: TIA'.(S'	SUFFI		- 00 4 0 5 10 5 0 5 11 INC 055 101	- HOT ONLY
DEBTOR'S NAME: Provide (10a or 10b) any one addition	ional Debtor name or Debtor name that did	not fit in line 1b or 2b of the	E SPACE IS FOR FILING OFFICE Financing Statement (Form UCC1) (us	
do not omit, modify, or abbreviate any part of the Debtor's na	ame) and enter the mailing address in line	10c		
	),			
R 10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME	0_			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	<del></del>			SUFFIX
c. MAILING ADDRESS	Сіт		STATE POSTAL CODE	COUNTRY
	0,			
1. ADDITIONAL SECURED PARTY'S NAME OF	ASSIGNOR SECURED A	ARTY'S NAME: Provid	only one name (11a or 11b)	
	FIRST PERSONAL		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
H 11b INDIVIDUAL'S SURNAME	INSTITUTOUNE	C	, (o)	
	CITY	10.	STATE POSTAL CODE	COUNTRY
IC. MAILING ADDRESS				1
c. MAILING ADDRESS  2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				
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			CO Oppos	<u> </u>
			CO OFFICE	
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		G STATEMENT:	CO OFFICE	-
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International Association of Commercial Administrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDENDUM (Form UCC1Ad) (Rev. 04/20/11)