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1707519012

Doc# 1707519012 Fee \$42.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 03/16/2017 10:05 AM PG: 1 OF 3

A. NAME & PHONE OF CONTACT AT FILER [optional]
FTL Finance (888)314-4588

B. E-MAIL CONTACT AT FILER [optional]
customerservice@ftlfinance.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)
FTL Finance
820 South Main Street Suite 300
St. Charles, MO 63301

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 FERGUSON	FIRST PERSONAL NAME ROBERT	ADDITIONAL NAME(S) / INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 22834 MILLARD AVE	CITY RICHTON PARK	STATE IL	POSTAL CODE 60471

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 NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE

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

3a. ORGANIZATION'S NAME
FTL Finance

OR

3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 820 South Main Street Suite 300	CITY St. Charles	STATE MO	POSTAL CODE 63301

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

Goodman #1506581427 AC

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/Licenser

8. OPTIONAL FILER REFERENCE DATA
91614, ROBERT FERGUSON

S Y
P 3
S N
M N
SC Y
E Y
INT AV

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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	
FERGUSON	
FIRST PERSONAL NAME	
ROBERT	
ADDITIONAL NAME(S) / INITIAL(S)	SUFFIX

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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

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

11a. ORGANIZATION'S NAME				
FTL Finance				
OR				
11b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S) / INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
820 South Main Street Suite 300	St. Charles	MO	63301	

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):

Recorded Owner: ROBERT FERGUSON
Owner Address:
22834 MILLARD AVE
RIGHTON PARK, IL 60471

16. Description of real estate:

APN: 31-35-319-023-0000, Legal Lot: 215, Subdivision:
FALCON CREST ESTATES 03, DOCUMENT NUMBER
17429052 DATED 04/17/2015 AND RECORDED 06/23/2015.

see attached.

17. MISCELLANEOUS:

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Lot 215 in Final Plat Unit No. 3 Falcon Crest Estates, in Richton Park, a Resubdivision of certain lots in Falcon Crest Estates Unit No. 1 and Falcon Crest Estates Unit No. 2, a Subdivision in the East half of the West half of Section 35, Township 35 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois

Commonly known as 22834 Millard Ave., Richton Park, IL 60471

Property Index No. 31-35-319-023-0000

Property of Cook County Clerk's Office