## UNOFFICIAL COPY

UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS	ENT	Doc#	*1721313098 Fee \$40	3.00
A. NAME & PHONE OF CONTACT AT FILER (optional) BELINDA BAIER 847-692-7500  B. E-MAIL CONTACT AT FILER (optional) BELINDA.BAIER@NSCOMBANK.COM  C. SEND ACKNOWLEDGMENT TO: (Name and Address)  NORTHSIDE COMMUNITY BANK 8060 W OAKTON ST NILES IL 60714		KAREN (	EE:\$9.00 RPRF FEE: \$1.00 A.YARBROUGH OUNTY RECORDER OF DEEDS 08/01/2017 04:08 PM PG	
1a. INITIAL FINANCING STATEMENT FIL T. NUMBER		b. This FINANCING STATEM (or recorded) in the REAL		record)
TERMINATION: Effectiveness of the Fir ancir. Statement identified a Statement	above is terminated w		andum (Form UCC3Ad) and provide Debto t(s) of Secured Party authorizing this	
ASSIGNMENT (full or partial): Provide name of Assignce in item 7a     For partial assignment, complete items 7 and 9 and a so it dir at affect	or 7b, <u>and</u> address of ed collateral in item 8	Assignee in item 7c and name of	Assignor in item 9	-
4. CONTINUATION: Effectiveness of the Financing Statement Lenting continued for the additional period provided by applicable law	d above with respect	to the security interest(s) of Secu	red Party authorizing this Continuation	on Statement is
Check one or these two boxes:	k ne c th se three both HANGF. Line and/or a em 6a or 3b; and item 7 change - provide only s	ddress: Complete ADD name a or 7b <u>and</u> item 7c 7a or 7b, i	e: Complete itemDELETE name: and item 7c to be deleted in i	Give record name tem 6a or 6b
OR 6b, INDIVIDUAL'S SURNAME	FIRST PERSON	AL MAN'S	AODITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inf    Ta. ORGANIZATION'S NAME	ormation Change - provide o	nly <u>one</u> name (?' ^. ro) (use exact, full nam	ne, do not omit, modify, or abbreviate any part o	f the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME		0	<u> </u>	<u>.</u>
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			Oxx	SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CUDE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:  Indicate collateral:	ADD collateral			ASSIGN collateral
	S AMENDMENT: P		ame of Assignor, if this is an Assignme	ent) 
98. ORGANIZATION'S NAME NORTHSIDE COMMUNITY BANK OR	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 9b, INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	POOLITONAL IAMETONIMI IVETO)	35.11/
10. OPTIONAL FILER REFERENCE DATA:	-			

**CCRD REVIEWER** 

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EXHIBIT "A"

LOT 3 OF MACLEAN'S SUBDIVISION OF PART OF LOT 8 IN ASSESSOR'S DIVISION OF SECTION 35, TOWNSHIP 42 NORTH RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN RECORDED SEPTEMBER 2, 1952 AS DOCUMENT NUMBER 15424733 IN COOK COUNTY, ILLINOIS.

The Real Property or its address is commonly known as 1717 Glenview Road, Glenview, IL 60025

PIN: 00-35-400-011-0000

COOK COUNTY CLOTH'S OFFICE