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UCC FINANCING STATEMENT AMENDMEN	Т	:		ii
FOLLOW INSTRUCTIONS		Boc# 1735	422015 Fee \$40.0	30
A. NAME & PHONE OF CONTACT AT FILER (optional) Erin Guest 309-662-4444 ext. 2536				-
B. E-MAIL CONTACT AT FILER (optional)		RHSP FEE:\$9.	00 RPRF FEE: \$1.00	
etgucst@hbtbank.com	·	KAREN A.YARB	ROUGH	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		COOK COUNTY	RECORDER OF DEEDS	
Heartland Bank and Trust Company 401 N Hershey Road Bloomington, IL 61704		DATE: 12/20/	2017 10:32 AM PG: 1	OF 2
				-
			CE IS FOR FILING OFFICE	
1a. INITIAL FINANCING STATEMENT FILE N JMBER 0319834094	1b. 🔽	(or recorded) in the REA	MENT AMENDMENT is to be file LESTATE RECORDS dendum (Form UCC3Ad) <u>and</u> provide	
2. TERMINATION: Effectiveness of the Financing Statement identified above Statement	e is terminated with re	spect to the security intere	st(s) of Secured Party authorizing	ng this Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b For partial assignment, complete items 7 and 9 and lise in Gate affected co		gnee in item 7c <u>and</u> name	of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statemen iden, fied about continued for the additional period provided by applicable law.	ove with respect to the	security interest(s) of Sec	cured Party authorizing this Conf	inuation Statement is
5. PARTY INFORMATION CHANGE:				
Check one of these two boxes.	of mese three boxes to ar mame and/or addres		me: Complete item DELETE r	name: Give record name
This Change affects Debtor or Secured Party of record item 6a	r 6b; and item 7a or 7	banditem 7c 7a or 7b		ted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Changes 6a. ORGANIZATION'S NAME	ge - pr vide culy one na	ime (6a or 6b)	<u></u>	
WESTERN SPRINGS NATIONAL BANK	AND TRUS	T U/T/A DATE	CD 11/3/95 A/K/A	TRUST#3514
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N.	AM E	ADDITIONAL NAME(S)/INITIAL	(S) SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Tal. ORGANIZATION'S NAME	on Change - provide only <u>one</u>	nomu (/a or 7b) ///se exact, full n	ame; do not omit, modify, or abbreviate an	y part of the Debtor's name)
7b. INDIVIDUAL'S SURNAME		C	۷.	
INDIVIDUAL'S FIRST PERSONAL NAME		<u> </u>	S	· · ·
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
			//x.	
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral D	ELETE collateral	RESTATE covered collateral	ASSI ON sellatoral
Indicate collateral:				P ()
				<u> </u>
				S_ <u>/</u> V_
				M A
				00 1/
				<u> SC /</u>
	MENDMENT: Provide ame of authorizing Det		name of Assignor, if this is an Ass	signmany
9a. ORGANIZATION'S NAME HEARTLAND BANK AND TRUST COMI	PANY			INTOT
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	AME	ADDITIONAL NAME(S)/INITIAL	D SUFFIX
<u> </u>	1			

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INITIAL FINANCING STATEMENT FILE NOMBER: SE 319834094	ame as item 1a on Amendment form		
NAME OF PARTY AUTHORIZING THIS AMENDMENT	T: Same as item 9 on Amendment form	1	
128. ORGANIZATION'S NAME HEARTLAND BANK AND TRUST COMPA	ANY		
12b, INDIVIDUAL'S SURNAME		1	
FIRST PERSONAL NAME		1	
ADDITIONAL NAME(S)/INI. 15,	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE US	E ONLY
Name of DEBTOR on related financing states and (Nar one Debtor name (13a or 13b) (use exact, full name; do not or		lexing purposes only in some filing offices - see Instruction item 13	
13a. ORGANIZATION'S NAME			
WESTERN SPRINGS NATIONAL BANK A 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
		/ / / .	
	Colyna Colyna	C/OPTS OFFICE	
This FINANCING STATEMENT AMENDMENT: covers timber to be cut	17. Descr eral ☑ is filed as a fixture filing Sub-L.	iption of real estate: of 94 in Koester and Zanders West Irving Park	
	eral is filed as a fixture filing Sub-Lribed in item 17 Subdiv North,	iption of real estate:	p 40

18. MISCELLANEOUS: