

# UNOFFICIAL COPY



\*1903719303\*

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

Joc# 1903719303 Fee \$42.00

CHSP FEE: \$9.00 RPRF FEE: \$1.00

EDWARD M. HOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 02/06/2019 03:26 PM PG: 1 OF 3

A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294	
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
1587 72548 CSC 801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Illinois (Cook)

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 THOMPSON		FIRST PERSONAL NAME MARGARET	ADDITIONAL NAME(S)/INITIAL(S) SMITH	SUFFIX
1c. MAILING ADDRESS 4331 S PRAIRIE AVE		CITY CHICAGO	STATE IL	POSTAL CODE 60653-3205	COUNTRY 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
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

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 Aqua Finance, Inc.					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS One Corporate Drive Suite 300		CITY Wausau	STATE WI	POSTAL CODE 54401	COUNTRY USA

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

HOME IMPROVEMENT:  
PORCH, KITCHEN REMODEL, PLUMBING

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  Agricultural Lien  Non-UCC Filing

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

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA: :AFIS002032209

1587 72548

SV  
R/3  
SN  
SCV  
INT

**UNOFFICIAL COPY****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	
THOMPSON	
FIRST PERSONAL NAME	
MARGARET	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
SMITH	

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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				
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):

MARGARET SMITH THOMPSON  
4331 S PRAIRIE AVE  
CHICAGO, IL 60653-3205

16. Description of real estate:

4331 S PRAIRIE AVE  
CHICAGO, IL 60653-3205  
County: COOK COUNTY  
Parcel Number: 20-03-304-014  
FULL LEGAL DESCRIPTION IS ATTACHED

17. MISCELLANEOUS:

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AERIAL EASEMENT: THAT PART OF THE WEST 7.00 FEET OF THE EAST 32.00 FEET OF THE NORTH  $\frac{1}{2}$  OF LOT 7 IN BLOCK 1, IN PIKE'S SUBDIVISION OF THE NORTHWEST  $\frac{1}{4}$  OF THE SOUTHWEST  $\frac{1}{4}$  OF SECTION 3, TOWNSHIP 38 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, HAVING AS A LOWER LIMIT A HORIZONTAL PLANE OF ELEVATION +32.25 FEET CCD (CHICAGO CITY DATUM), AND AS AN UPPER LIMIT A HORIZONTAL PLANE OF ELEVATION +52.25 FEET CCD, SAID ELEVATIONS ARE BASED ON CITY OF CHICAGO BENCHMARK NUMBER 13, HAVING AN ELEVATION OF 16.39 FEET, IN COOK COUNTY, ILLINOIS.

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