ICC FINANCING STATEMENT			*1906017030*  'Doc# 1906017030 Fee \$42.25  RHSP FEE:\$9.00 RPRF FEE: \$1.00				
A. NAME & PHONE OF CONTACT AT FILER (o	optional)	the state of the s	WARD M. MOO				
3. E-MAIL CONTACT AT FILER (optional)				CORDER OF DEEDS	•		
filings@loanpalsupport.com		DATE: 03/01/2019 11:43 AM PG: 1 OF 2					
C. SEND ACKNOWLEDGMENT TO: (Name as	ind Address)			14-49 HII PG:	1 OF 2		
The state of the s	ND 4 1 1		- <del> </del>				
Paramount Equity Mortgage, LLC D PO Box 4387	DBA Loanpal	'					
Portland, OR 97208							
1		, <b> </b>					
		THE ABOV	E SDACE 18 FC	R FILING OFFICE USE	ONLY		
. DEBTOR'S NAME: Provide only one Debtor na	ame (1a or 1b) (use exact_full n						
name will not fit in line 1b, leave all of lem. 1 blank,							
1a. ORGANIZATION'S NAME	,						
R	7	COST REGIONAL MANAGE	ADDITIO	NAL MAMERICARNITIALION	Terreiv		
1b. INDIVIDUAL'S SURNAME Cummins		first personal name Anthony	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
: MAILING ADDRESS	Ux	CITY	STATE	POSTAL CODE	COUNTRY		
421 N Gibbons Avenue		Arlington Heights	IL	60004	USA		
DEBTOR'S NAME: Provide only one Debtor na	ame (2a or 2b) (us, excet, full n	ame: do not omit, modify, or abbreviate any	part of the Debtor	's name): if any part of the Ir			
name will not fit in line 2b, leave all of item 2 blank,		le Individual Debtor information in item 10					
2a. ORGANIZATION'S NAME	1						
10		FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)			
26. INDIVIDUAL'S SURNAME		12 - 4			SUFFIX		
Becker		Kathryn		Inoctal cons			
Becker  C. MAILING ADDRESS		СІТҮ	STATE	POSTAL CODE ,	COUNTRY		
Becker  c. MAILING ADDRESS 421 N Gibbons Avenue		Arlington Veights	STATE	60004	COUNTRY		
Becker  MAILING ADDRESS  421 N Gibbons Avenue  SECURED PARTY'S NAME (or NAME of AS	SSIGNEE of ASSIGNOR SECUR	Arlington Veights	STATE	60004	COUNTRY		
Becker  b. MAILING ADDRESS  421 N Gibbons Avenue  SECURED PARTY'S NAME (or NAME of AS)  3a. ORGANIZATION'S NAME		Arlington Veights	STATE	60004	COUNTRY		
Becker  c. MAILING ADDRESS  421 N Gibbons Avenuc  SECURED PARTY'S NAME (or NAME of AS)  3a. ORGANIZATION'S NAME  Paramount Equity Mortgage, LLC D	BA Loanpal	Arlington Veights	STATE IL arty name (3a or 3t	60004	COUNTRY		
Becker  c. MAILING ADDRESS  421 N Gibbons Avenuc  SECURED PARTY'S NAME (or NAME of AS)  3a. ORGANIZATION'S NAME  Paramount Equity Mortgage, LLC D	BA Loanpal	CITY Arlington Veights RED PARTY): Provide only one Secured P.	STATE IL arty name (3a or 3t	60004	COUNTRY USA		
Becker  c. MAILING ADDRESS  421 N Gibbons Avenuc  SECURED PARTY'S NAME (or NAME of AS)  3a. ORGANIZATION'S NAME  Paramount Equity Mortgage, LLC D	BA Loanpal	CITY Arlington Veights RED PARTY): Provide only one Secured P.	STATE IL arty name (3a or 3t	60004	COUNTRY USA		

D 2-28-19

being administered by a Decedent's Personal Representative

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

Agricultural Lien

Bailee/Bailor

X Non-UCC Filing

Licensee/Licensor

Consignee/Consignor

A Debtor is a Transmitting Utility

Seller/Buyer

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)

Manufactured-Home Transaction

X Lessee/Lessor

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

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA: Acct # 1809004249

Public-Finance Transaction

1906017030 Page: 2 of 2

## **UNOFFICIAL COPY**

## UCC FINANCING STATEMENT ADDENDUM

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								
OR 96. INDIVIDUAL'S SURNAME Cummins								
FIRST PERSONAL MAME								
Anthony  ADDITIONAL NAME(")/INITIAL(S)	SUFFIX				:			
10. DEBTOR'S NAME: Provide (10a (1175) only one additional Debtor name or					Corm UCC1) (use			
do not omit, modify, or abbreviate any period the Debtor's name) and enter the m	alling address in line 100					···		
OR 10b. INDIVIDUAL'S SURNAME				r				
INDIVIDUAL'S FIRST PERSONAL NAME								
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX		
10c. MAILING ADDRESS	CITY		STATE	POSTAL	CODE	COUNTRY		
	DR SECUPED PARTY	S NAME: Provide	only <u>one</u> na	ame (11a or	11b)	<u></u>		
11a. ORGANIZATION'S NAME	40x,							
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME	(S)/INITIAL(S)	SUFFIX		
Itc. MAILING ADDRESS	CITY	0	STATE	POSTAL (	CODE	COUNTRY		
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):		7	/	1.		l		
			<i>S</i>	$)_{\kappa}$	:			
					0			
13. XI This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14, This FINANCING STATE	<del></del>			<u></u>			
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	covers timber to be c		extracted (	collateral	is filed as a	fixture filing		
Anthony Cummins and Kathryn Becker	County of: Cook							
	Address of Real Estate: 421 N Gibbons Avenue, Arlington Heights, IL 60004							
	APN: 03283010160000							
	LOT 4, 1STUMC, 28-4	12-11						