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## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS	
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-3	31-3282 Fax: 818-662-4141
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	38937 - United Bank
Lien Solutions P.O. Box 29071	72065837
Glendale, CA 91209-9071	ILIL
	FIXTURE

*1929540026*
Doc# 1929540026 Fee \$93.00
RHSP FEE:\$9.00 RPRF FEE: \$1.00 TDWARD M. MOODY
COOK COUNTY RECORDER OF DEEDS PATE: 10/22/2019 01:31 PM PG: 1 OF 3
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	ITIE AE	BOVE SPACE IS FOR FILING OFFICE U	SE ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a or	<u> </u>		
name will not fit in line 1b, leave all of iter (1 t lank, check here	and provide the Individual Debtor information in Item	10 of the Financing Statement Addendum (Form	UCC1Ad)
1a. ORGANIZATION'S NAME			
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
HERRERA	ERIC		
MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
343 W 59TH PL	CHICAGO	IL 60629	USA
DEBTOR'S NAME: Provide only one Debtor name (2a or			
ame 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	$\tau_{\sim}$		
2b. INDIVIDUAL'S SURNAME	FIRST PEPSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
25. INDIVIDUAL 3 SURVAINE	PINST ENSURE NAME	ADDITIONAL NAME (O)MICTIAL (O)	30111
MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
	1/x,		
SECURED PARTY'S NAME (or NAME of ASSIGNEE of	(ASSIGNOR SECURED PARTY): Provide only the Secure	ed Party name (3a or 3b)	
3a. ORGANIZATION'S NAME			
UNITED BANK			
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(SYINITIAL(S)	SUFFIX
•		4	
MAILING ADDRESS	CITY	S TATE POSTAL CODE	COUNTRY
1645 ELLINGTON RD COLLATERAL: This financing statement covers the following	SOUTH WINDSOR	CT 05074	COUNTRY
645 ELLINGTON RD COLLATERAL: This financing statement covers the following	SOUTH WINDSOR	0. L	
645 ELLINGTON RD COLLATERAL: This financing statement covers the following	SOUTH WINDSOR	CT 05074	
1645 ELLINGTON RD COLLATERAL: This financing statement covers the following	SOUTH WINDSOR	CT 05074	
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645 ELLINGTON RD  COLLATERAL: This financing statement covers the following EMODEL  Check only if applicable and check only one box: Collateral is	SOUTH WINDSOR g collateral:	CT [ 0:074	S 3 S N S C Y E Y Onal Representa
COLLATERAL: This financing statement covers the following EMODEL  Check only if applicable and check only one box: Collateral is Check only if applicable and check only one box:	SOUTH WINDSOR  g collateral:    Description   Property   Property	ct [0:074  ct   0:074  ct   0:074  ct   0:074  ct   0:074	S 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
c. MAILING ADDRESS  1645 ELLINGTON RD  COLLATERAL: This financing statement covers the following EMODEL  Check only if applicable and check only one box: Collateral is a check only if applicable and check only one box:  Public-Finance Transaction Manufactured-Hoalternative Designation (if applicable): Lessee/	SOUTH WINDSOR  collateral:  S held in a Trust (see UCC1Ad, item 17 and Instruction  me Transaction	CT Un074  CT Un074  This being administered by a Decedent's Pers  6b. Check only if applicable and check only if a policies and chec	S 3 S N S C Y E Y Onal Representa

1929540026 Page: 2 of 3

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**UCC FINANCING STATEMENT ADDENDUM** 

FOLLOV	V IÑSTRUCTIONS						
	OF FIRST DEBTOR: Same as line 1a or 1b on Financing Stat	ement; if line 1b was left	blank				
	e Individual Debtor name did not fit, check here						
04. 6	ACAME TO STATE						
_							
OR 9h II	NDIVIDUAL'S SURNAME						
	ERRERA						
	IRST PERSONAL NAME						
- 1	RIC						
	IDDITIONAL NAME(SYINITIAL(S'	-	SUFFIX				
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10 DEDI	FORM MANUEL OF THE AREA OF THE STATE OF THE						
	FOR'S NAME: Provide (10a / , 10b, only one additional Debi omit, modify, or abbreviate any part of the Debtor's name) and e			ine 10 or 20 of the Fi	nancing Si	atement (Form UCC+) (us	se exact, ruii name;
	ORGANIZATION'S NAME	sinci tilo ilibilitig dodress		<u>.</u>			<del></del>
OR 10b.	INDIVIDUAL'S SURNAME						
	O <sub>x</sub>						
-	INDIVIDUAL'S FIRST PERSONAL NAME	$\overline{}$					
<u> </u>	INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)						SUFFIX
		4					
10c. MAIL	ING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
11. A	ADDITIONAL SECURED PARTY'S NAME OF	ASSIGNOR SECURE	ن ARTY'S N	IAME: Provide only	one nam	e (11a or 11b)	
	ORGANIZATION'S NAME		42			· · · · · · · · · · · · · · · · · · ·	
			//×,				
OR 11b.	INDIVIDUAL'S SURNAME	FIRST PERSO	ONAL NAME		ADDITIO	NAL NAME(SYINITIAL(S)	SUFFIX
						•	
11c. MAIL	ING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
				<u> </u>			
12. ADDI	TIONAL SPACE FOR ITEM 4 (Collateral):			7			
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						(C)	
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	is FINANCING STATEMENT is to be filed [for record] (or reco EAL ESTATE RECORDS (if applicable)		IANCING STATE			<b>N</b>	•
			ers timber to be		extracted	collateral X is filed as	a fixture filing
	and address of a RECORD OWNER of real estate described of or does not have a record interest):	Parce	ion of real estate	<del>)</del> :			
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PARCEL #: 19-14-407-005-0000							
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17. MISCI	ELLANEOUS: 72065837-IL-31 38937 - United Bank	UNITED BANK		File with: Cook, IL	2068746		

1929540026 Page: 3 of 3

## **UNOFFICIAL COPY**

Debtor: HERRERA, ERIC

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**Exhibit for Real Estate** 

16. Description of real estate:

Continued

LOTS 66 NAD 67 IN IRA A. EBERHART'S
SIJBDIVISION OF BLOCK 2 IN JAMES WEBB'S
SUBDIVISION OF THIS SOUTHEAST 1/4 OF SECTION
14, TOWNSHIP 38 NORTH, RANGE 13, EAST OF THE
THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY,
ILLINOIS.DOC#1834008022 12/6/2018