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Doc# 2118846051 Fee \$93.00

UCC FINANCING STATEMENT RHSP FEE:\$9.00 RPRF FEE: \$1.00 **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) KAREN A. YARBROUGH CSC 1-800-858-5294 COOK COUNTY CLERK B. E-MAIL CONTACT AT FILER (optional) DATE: 07/07/2021 03:05 PM PG: 1 OF 2 SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 2130 85347 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 ne I) ebtor 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 Dink, 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 FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Neal Lehmann 1c. MAILING ADDRESS 1005 Forest Rd POSTAL CODE COUNTRY CITY STATE ΙL 60526 USA La Grange Park 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use except full name), 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 in a ndividual 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 STATE POSTAL CODE COUNTRY 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Sergieu Party name (3a or 3b) 3a. ORGANIZATION'S NAME All In Credit Union FIRST PERSONAL NAME SUFFIX 3b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) POSTAL CODE COUNTRY 3c. MAILING ADDRESS P.O. Drawer 8 Daleville ΑL 38322 USA . COLLATERAL: This financing statement covers the following collateral:
14.720000 kW photovoltaic solar energy system, consisting of: Talesun modules, SolarEdge inverter AND ALL OTHER PRODUCTS, PROCEEDS AND ATTACHMENTS. 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 6b. 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 Fiting

Consignee/Consignor

Seller/Buyer

Bailee/Bailor

Licensee/Licensor

2130 85347

Lessee/Lessor

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA:

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## 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 9b. INDIVIDUAL'S SURNAME Lehmann FIRST PERSONAL NA' ... Neal ADDITIONAL NAME(S)/INIT' L(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or (with ) nly 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 pan of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) POSTAL CODE COUNTRY STATE 10c. MAILING ADDRESS ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11b. INDIVIDUAL'S SURNAME 11c. MAILING ADDRESS POSTAL CODE COUNTRY SOM OFFICE 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 16. Description of real estate: (if Debtor does not have a record interest): L16 B12 LAGRANGE PARK HOMESITES SUB D NW1/4 NE1/4 & NE1/4 NW1/4 S33 T3 9N R12E Munic/Township: PROVISO 17. MISCELLANEOUS: