# UNOFFICIAL COPY

		*2126222054*				
JCC FINANCING STATEMENT	1	Doc# 212022205	54 Fee \$88.00	ı		
OLLOWINSTRUCTIONS		RHSP FEE:\$9.00 RPR	F FEE: \$1.00			
A. NAME & PHONE OF CONTACT AT FILER (optional)	i	CAREN A. YARBROUGH				
. E-MAIL CONTACT AT FILER (optional)	·	COOK COUNTY CLERK				
,	•	DATE: 07/21/2021 0	3:11 PM PG: 1:	ne a		
SEND ACKNOWLEDGMENT TO: (Name and Address)		WIEF 011 E11 E0E1 0	3,11,111,141,	J. J		
		279	568225	5		
	. <b>┛┃</b> тн	E ABOVE SPACE IS FO	R FILING OFFICE USE	ONLY		
DEBTOR'S NAME: Provide only yor, we btor name (1a or 1b) (use exact, name will not fit in line 1b, leave all of item) of ok, check here and provide the control of the cont	full name; do not omit, modify, or abbr vide the Individual Debtor information in					
1a. ORGANIZATION'S NAME		-				
Gibbs	FIRST PERSONAL NAME  Michael		VAL NAME(S)/INITIAL(S)	SUFFIX		
c. MAILING ADDRESS 2242, N LINCOLN PARK W, UNIT# 3F	CHICAGO	STATE IL	60614	USA		
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exac						
name will not fit in line 2b, leave all of item 2 blank, check here and profile.  2a. ORGANIZATION'S NAME	viae / - Individual Debtor information in	Trem to or the Financing Ste	Refilent Addendam (Point C			
R 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
Ierulli	Kathrya	J	:			
MAILING ADDRESS 2242, N LINCOLN PARK W, UNIT# 3E	CHICAGO	STATE IL.	POSTAL CODE 60614	COUNTRY		
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S	ECURED PARTY): Provide only one S	or cured Party name (3a or 3b	)			
3a. ORGANIZATION'S NAME						
Citibank, N.A. 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	TAPRITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
35. INDIVIDUAL S SURNAME	FIRST PERSONAL NAME	Applino	TAL TARRETONIALISTE(O)	Journa		
c. MAILING ADDRESS 1000 Technology Drive	O'Fallon		POSTAL CODE 03368-2240	COUNTRY		
COLLATERAL: This financing statement covers the following collateral: "The Cooperative Interest(s) associated with the Co 2242, N LINCOLN PARK W, CHICAGO, IL 60614 Cooperative Corporation (Coop Corp. Name: SHA Unit(s) plus the proprietary lease(s) or occupancy a and any proprietary lease or occupancy agreement (Debtors') right, title and interest in and to all dwel inclusive of all fixtures and appurtenances, erected Land known as and by the related street address, in voluntary or involuntary, of any of the foregoing in insurance and condemnation awards and any unear insurance policies now or hereafter obtained by the	4. The Debtor's (Debtors' KESPEARE BUILDING greement(s) for said unity amendments, replacementings, buildings, parking now or in the future, on colusive of all replacement to cash or liquid claims, in the premiums accrued,	) interest in the sha CORPORATION) (s) and any replace nts, extensions or re spaces, storage spa or in the Cooperative ts and additions. A ncluding, without l	res of stact issued allocated to the Coments and addition enewals. The Debt ces, and other struck Unit(s), Site, Plus proceeds of the imitation, proceed	I by the Cooperatinal stock or's ot, Lot or conversions		
	rust (see UCC1Ad, item 17 and Instruc		red by a Decedent's Person			
		6b. Check <u>only</u>	if applicable and check <u>only</u>	one box:		
		1100a.	tural Lina Division	C Elle-		
Sa. Check only if applicable and check only one box:  Public-Finance Transaction Manufactured-Home Transaction  7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	A Debtor is a Transmitting  Consignee/Consignor		tural Lien Non-UC	C Filing		

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UCC FINANCING STATEMENT ADDENDUM	IVI					
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statemen	nt; if line 1b was left bla	ınk				
9a. ORGANIZATION'S NAME						
					-	
OR 9b. INDIVIDUAL'S SURNAME						
Gibbs						
FIRST PERSON LEN'Y.E						
Michael  ADDITIONAL NAME(S)/ACTIVATES	leu	FFIX				
ADDITIONAL NAME(S)/MOVES			THE ABOVE	SPACEI	S FOR FILING OFFIC	E USE ONLY
10. DEBTOR'S NAME: Provide (10s or 10b) on 20e additional Debtor name	e or Debtor name that	did not fit in line '				
do not omit, modify, or abbreviate any part of the Dibtor's name) and enter the	ne mailing address in li	ne 10c				
10a. ORGANIZATION'S NAME						
OR 10b, INDIVIDUAL'S SURNAME						<del></del>
Gibbs						•
INDIVIDUAL'S FIRST PERSONAL NAME			· · · · · · · · · · · · · · · · · · ·			
Michael INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	)					SUFFIX
John						
2242, N LINCOLN PARK W, UNIT# 3E	CHICAC			STATE	POSTAL CODE	COUNTRY
	SNOR SECURE!		AMF: Provide o	1		-
11a. ORGANIZATION'S NAME		7 X,		, 1112		
OR 11b. INDIVIDUAL'S SURNAME	LEIDOT DEDOCU			ADDITIO	NAL NAME(S)/INITIAL(S	SUFFIX
Ierulli	First person Kathryn	AL NAME		ADDITIC	INAL NAME(S)/INITIAL(S)	SUFFIX
11c, MAILING ADDRESS .	CITY		70.	STATE	POSTAL CODE	COUNTRY
2242, N LINCOLN PARK W, UNIT# 3E	CHICAC	<del>50</del>		IL	60614	USA
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):			*	0,		
Loan # 004778741837				0		
					U <sub>2</sub> C <sub>2</sub>	
					Co	
13. This FINANCING STATEMENT is to be filed (for record) (or recorded) in REAL ESTATE RECORDS (if applicable)		ING STATEMEN	_			
15. Name and address of a RECORD OWNER of real estate described in item 16		imber to be cut of real estate:	covers as-	extracted	collateral is filed a	s a fixture filing
(if Debtor does not have a record interest):						
	See Sched	ule /Exhibit	A			
					•	
						•
·						
17. MISCELLANEOUS:	,					

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### **UNOFFICIAL COPY**

Loan # : 004778741837

### **Exhibit A**

LEGAL DESCRIPTION

The following described property:

Situated in the City of Chicago, County of Cook, State of Illinois:

The Shakespeare Building (the "Corporation") and am lawfully entitled to occupy Apartment 3E (the "Apartment") in the building located at 2242 N Lincoln Park W, 3E, Chicago, IL 60614.

Assessor's Parcel No: 14-33-202 013