UNOFFICIAL COPY

	Doc#. 2400913384 Fee: \$107.00							
	Karen A. Yarbrough							
	Cook County Clerk							
	Da	te: 01/09/2024 12:49	PM Pg: 1 (of 2				
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS								
A. NAME & PHONE OF CONTACT AT FILER (optional) Elderlife Financial Lending, LLC - 888-228-4500								
B. E-MAIL CONTACT AT FILER (optional)								
uccfiling@elderlifefinancial.com								
C. SEND ACKNOWLEDGMENT TO: (Name and Address)								
ELDERLIFE FINANCIAL LENDING, LLC	\neg 1							
ATTN: LEGAL DEPARTMENT	1							
100 Bluegra's Commons Blvd, Bldg. 1, Ste. 120								
HENDERSONVILLE, TN 37075								
L 'O _A		THE ABOVE		D EU INO OFFICE LIGE	2NII 37			
1 DEDTOP'S NAME: Provide and Sold and Manager Manager All Company				R FILING OFFICE USE				
1. DEBTOR'S NAME: Provide only on Distorname (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item it and check here and provide 1a. ORGANIZATION'S NAME				atement Addendum (Form UC				
Id. ONGANIZATIONS NAME								
OR 1b, INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)				
Bolam	Carolyn		$ \mathbf{J} $	$ \mathbf{J} $				
1c. MAILING ADDRESS 16051 S La Grange Rd	Orland P	ark	STATE	POSTAL CODE 60467	COUNTRY			
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exart, ful name will not fit in line 2b, leave all of item 2 blank, check here and provide								
2a. ORGANIZATION'S NAME				, , , , , , , , , , , , , , , , , , , ,				
OR 2b. INDIVIDUAL'S SURNAME	FIRST P'.RSC NA	FIRST P'.RSC NAL NAME		ADDITIONAL NAME(S)/INITIAL(S)				
2c. MAILING ADDRESS	CITY	Dx.	STATE	POSTAL CODE	COUNTRY			
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED)	IDED BARTY: Prov	ide our one See d Party	neme /3a or 3h		1			
3a. ORGANIZATION'S NAME	DRED PARTT). PIO	ide only one secure Faity	lisilie (38 O 31	"				
ELDERLIFE FINANCIAL LENDING, LL	LC .	4/0						
3b, INDIVIDUAL'S SURNAME	FIRST PERSONA	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX			
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY			
100 BLUEGRASS COMMONS BLVD, BLDG 1, STE 120		SONVILLE	TN	37075	USA			
4. COLLATERAL: This financing statement covers the following collateral:								
All Fixtures appurtenant to:				OFFIC OF THE PROPERTY OF THE P				
18136 Rita Rd 1C								
Tinley Park IL 60477				(C ₂				
PARCEL ID: 28-31-401-076-1087 LEGAL DESCRIPTION:								
SITUATED IN THE COUNTY OF COOK AND STATE OF ILLIN	NOIS: UNIT HI	AND GARAGE UNIT	H1 C2 TOG	ETHER WITH ITS UN	DIVIDED			
PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN 1								
DECLARATION RECORDED AS DOCUMENT NUMBER 923567								
SOUTHEAST 4 OF SECTION 31, TOWNSHIP 36 NORTH, RANC ILLINOIS.	GE 13, EAST OF	THE THIRD FRINC	IF AL MICKI	DIAN, IN COOK COO	NII,			
Original Loan Amount: \$38,000.00								
Pursuant to the Memorandum of Agreement dated 01/04/2024, wher	rahy Carolyn Ral	um (harrawarte)) nrar	nice to nav tl	re total sum due under	the			
Promissory Note borrowers have with Elderlife Financial Lending, 1		· · · · · ·						
property.								
	(see UCC1Ad, item			red by a Decedent's Persona				
6a. Check only if applicable and check only one box:			_	if applicable and check only				
Public-Finance Transaction Manufactured-Home Transaction		Transmitting Utility		tural Lien Non-UCC				
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor 8. OPTIONAL FILER REFERENCE DATA:	Consignee/Consigne	ır Seller/Buyer	Ba	ilee/Bailor Licen	see/Licensor			

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UNOFFICIAL COPY UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statemberause Individual Debto: name did not fit, check here	ent; if line 1b was left blank							
9a. ORGANIZATION'S NAME								
OR 9b. INDIVIDUAL'S SURNAME								
Bolam								
FIRST PERSONAL NAME								
Carolyn	LOUEEN							
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX							
10. DEBTOR'S NAME. Pr. vide (10a or 10b) only one additional Debtor na	me or Debtor name that did :			S FOR FILING OFFICE tatement (Form UCC1) (us				
do not omit, modify, or above late any part of the Debtor's name) and enter			or the randrishing to	acomoni (i ann a da 1) (ac	a andat, rain marino,			
10a. ORGANIZATION'S NA 1E								
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 ASS	IGNOR SECURED PA	ARTY'S NAME: Pr	rovide only <u>one</u> na	mc (11a or 11b)				
11a. ORGANIZATION'S NAME				. ,				
OR	FIRST PERSONAL AND A STATE OF THE STATE OF T	A 6 4 F	ADDITIO	ELAL MANEYON/INSTITUTION	SUFFIX			
11b. INDIVIDUAL'S SURNAME	FIRST PERS JNAL N	AME	AODITIO	ADDITIONAL NAME(S)/INITIAL(S) SU				
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY			
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):								
		(6)						
			τ_{c}					
13. This FINANCING STATEMENT is to be filed [for record) (or recorded) in	n the 14. This FINANCING	STATEMENT:		<u> </u>				
REAL ESTATE RECORDS (if applicable)	covers timber		vers as-extracted o	ollateral 🔽 is filed as	a fixture filing			
15. Name and address of a RECORD OWNER of real estate described in item 1 (if Debtor does not have a record interest);	6 16. Description of rea	cstate:						
	18136 Rita Rd 10		477					
		Tinley Park IL 60477 PARCEL ID: 28-31-401-076-1087						
		LEGAL DESCRIPTION: SITUATED IN THE COUNTY OF COOK AND STATE OF ILLINOIS: UNIT H1						
		AND GARAGE UNIT H1 C2 TOGETHER WITH ITS UNDIVIDED PERCENTAGE						
				HAMILTON HILLS INED IN THE DECL				
				786 AS AMENDED I				
TO TIME, IN THE SOUTH ½ OF THE SOUTHEAST ¼ OF SECTION 31, TOWNSHIP 36 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL								
		COOK COUNTY		THE PHANTEN AND	** : ***			
17. MISCELLANEOUS:								