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 FILED FOR RECORD  
 BY: JAS  
 PG #: 3  
 RECORDED AS PRESENTED

STATE OF INDIANA  
 CLERK OF SUPERIOR COURT  
 FILED FOR RECORD  
 GINA PIMENTEL  
 RECORDER

**UCC FINANCING STATEMENT**  
 FOLLOW INSTRUCTIONS

**A. NAME AND PHONE OR CONTACT AT SUBMITTER (optional)**  
**Shoreham Bank (800) 223-1700**

**B. E-MAIL CONTACT AT SUBMITTER (optional)**  
**bzisk@shoreham.bank**

**C. SEND ACKNOWLEDGEMENT TO:** (Name and Address)

Shoreham Bank  
 One Shoreham Way  
 Warwick RI 02886

**SEE BELOW FOR SECURED PARTY CONTACT INFORMATION**

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**1. DEBTOR'S NAME:** Provide only one Debtor 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 1a, leave all of item 1 blank, check here  and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1A)

**1a. ORGANIZATION'S NAME:**

**OR**

<b>1b. INDIVIDUAL'S SURNAME</b> Mundy	<b>FIRST PERSONAL NAME</b> Rochelle	<b>ADDITIONAL NAME(S) (INITIALS)</b>	<b>SUFFIX</b>
<b>1c. MAILING ADDRESS</b> 1316 East 51st Avenue	<b>CITY</b> Gary	<b>STATE</b> IN	<b>POSTAL CODE</b> 46409
		<b>COUNTRY</b> USA	

**2. DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (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 2a, leave all of item 2 blank, check here  and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1A)

**2a. ORGANIZATION'S NAME:**

**OR**

<b>2b. INDIVIDUAL'S SURNAME</b> Mundy	<b>FIRST PERSONAL NAME</b> Kenneth	<b>ADDITIONAL NAME(S) (INITIALS)</b>	<b>SUFFIX</b>
<b>2c. MAILING ADDRESS</b> 1316 East 51st Avenue	<b>CITY</b> Gary	<b>STATE</b> IN	<b>POSTAL CODE</b> 46409
		<b>COUNTRY</b> USA	

**3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNEE of SECURED PARTY):** Provide only one Secured Party name (3a or 3b)

**3a. ORGANIZATION'S NAME**  
**Shoreham Bank**

**OR**

<b>3b. INDIVIDUAL'S SURNAME</b>	<b>FIRST PERSONAL NAME</b>	<b>ADDITIONAL NAME(S) (INITIALS)</b>	<b>SUFFIX</b>
<b>3c. MAILING ADDRESS</b> One Shoreham Way	<b>CITY</b> Warwick	<b>STATE</b> RI	<b>POSTAL CODE</b> 02886
		<b>COUNTRY</b> USA	

**4. COLLATERAL:** This financing statement covers the following collateral:

All materials being financed by Secured Party in connection with the construction of the renovation on the property described in this Financing statement included without limitations: pressure treated wood deck, deck cover, metal security doors, basement stairway, handrails, treads & risers, as installed/improved and all proceeds of the forgoing

**THE COLLATERAL DESCRIBED ABOVE IS LOCATED AT: 1316 East 51st Avenue, Gary IN 46409**

**5. Check only if applicable and check only one box:** Collateral is  held in a Trust (see UCC1A, item 17 and instructions)  being administered by a Decedent's Personal Representative

Public Finance Transaction  Manufactured Home Transaction  A Debtor is a Transferring Utility  Check only if applicable and check only one box

**7. ALTERNATIVE DESIGNATION (if applicable):**  Licensed Lessor  Checkmate/Checkmate  Seller/Buyer  Seller/Buyer  Licensed Lessor

**8. OPTIONAL FILER REFERENCE DATA**

# NOT AN OFFICIAL DOCUMENT

## 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

OR  
9b. INDIVIDUAL'S SURNAME

**Mundy**

FIRST PERSONAL NAME

**Rochelle**

ADDITIONAL NAME(S)#INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only 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 part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

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  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR  
11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)#INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral)

13.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (# 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 (if Debtor does not have a record interest)

16. Description of real estate:

See attached

17. MISCELLANEOUS:

# NOT AN OFFICIAL DOCUMENT

**Exhibit "A"**  
**Property Description**

The West 30 Feet of Lot 22 and the East 20 Feet of Lot 23, Block 7, as shown on the recorded plat of Hill Terrace, in the City of Gary, as per plat thereof, recorded in Plat Book 31, Page 19, in the Office of the Recorder of Lake county, Indiana.

FOR INFORMATIONAL PURPOSES ONLY

Also known by street address as: 1316 East 51st Avenue, Gary, IN 46409

And assessor's schedule or parcel no.: 45-08-34-477-003.000-004

Property of Lake County Recorder