

# Unofficial Document

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## UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)  
**CSC 1-800-858-5294**

B. E-MAIL CONTACT AT SUBMITTER (optional)

**SPRFiling@cscglobal.com**

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

4869 816  
CSC  
801 Adlai Stevenson Drive  
Springfield, IL 62703

Filed In: AZ  
Maricopa County

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 1b, leave all of item 1 blank, 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 <b>THORNTON</b>	FIRST PERSONAL NAME <b>JONATHON</b>	ADDITIONAL NAME(S)/INITIAL(S) <b>D</b>	SUFFIX
1c. MAILING ADDRESS	<b>7819 W JULIE DR</b>	CITY <b>GLENDALE</b>	STATE <b>AZ</b>	POSTAL CODE <b>85308</b>
COUNTRY <b>USA</b>				

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 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				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
COUNTRY				

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

3a. ORGANIZATION'S NAME <b>Foundation Finance Company LLC</b>				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	<b>10101 Market Street Suite B100</b>	CITY <b>Rothschild</b>	STATE <b>WI</b>	POSTAL CODE <b>54474</b>
COUNTRY <b>USA</b>				

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

**TURF PAVERS INSTALLED ONTO PROPERTY**

**JONATHON D THORNTON  
7819 W JULIE DR  
GLENDALE, AZ 85308**

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 Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA: **70325610/61260878**

**4869 816**

**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 <b>THORNTON</b>	
FIRST PERSONAL NAME <b>JONATHON</b>	
ADDITIONAL NAME(S)/INITIAL(S) <b>D</b>	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 Unofficial Document	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 (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  
(if Debtor does not have a record interest):

**JONATHON D THORNTON 7819 W JULIE DR  
GLENDALE, AZ 85308 USA**

16. Description of real estate:

Legal Description: LOT 132 ARROWHEAD RANCH AREA TWELVE MCR 279-34  
County: MARICOPA, AZ  
APN: 200-30-477  
Census Tract / Block: 6157.00 / 1  
Township-Range-Sect: 4N-1E-26  
Subdivision: ARROWHEAD RANCH AREA 12 AMD  
Map Reference: 28941 Legal Lot: 132  
Munic/Township: GLENDALE

17. MISCELLANEOUS: