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## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY	
A NAME & PHONE OF CONTACT AT FILER [optional] KONI DAVIS	(360) 704-7730
B. SEND ACKNOWLEDGMENT TO: (Name and Address)  USDA RURAL DEVELOPMENT	<del>-</del>
1835 BLACK LAKE BLVD SW, SUITE B	
OLYMPIA WA	98512

CHICAGO TITLE C22594

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

		4.44					
			- insert only one debtor name (1a or	1b) - do not abbreviate or combine names			
	1a. ORGANIZATION'S NA						
	MERCY PROPER	RTIES WASHIN	IGTON III, LLC				
or	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	WIDDLE !	MIDDLE NAME		
			M. V.				
			A Same Same	CITY	STATE	POSTAL CODE	COUNTRY
1¢. I	MAILING ADDRESS		The second se		CO	80203	USA
	601 E 18TH AVE #	150	Salah Sa	DENVER		1	007
1d.	Id. TAX ID #: SSN OR EIN ADD'L INFO RE 16. TYPE OF ORGANIZATION ORGANIZATION Ltd Liability Company		1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any			
			Ltd Liability Company	WASHINGTON STATE	1	NONE.	
2. /	ADDITIONAL DEBTOR	S EXACT FULL	LEGAL NAME - insert only one del	otor name (2a or 2b) - do not abbreviate or c	ombine names		
	2a. ORGANIZATION'S NA						
				w <sup>th</sup>			
OR	OR 2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME		
<u> </u>	MAILING ADDRESS	<u>`</u>		CITY	STATE	POSTAL CODE	COUNTRY
26,	MAILING ADDITION						
24	TAX ID #: SSN OR EIN	TADDYLINEO RE	2e. TYPE OF ORGANIZATION	21. JURISDICTION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID #, if any	
ORGANIZATION DESTOR			i	·	·		
3.	SECURED PARTY'S	NAME (or NAME	OF TOTAL ASSIGNEE OF ASSIGNOR S	SP) - insert only <u>one</u> secured party name (30	a or 3b)		
-	3a ORGANIZATION'S NA	WE					
	UNITED STATES	S OF AMERICA	ACTING THROUGH UNITE	D STATES DEPT. OF AGRICUL	LTURE, RURAL	HOUSING SERVI	CE
OR	36. INDIVIDUAL'S LAST I			FIRST NAME	MIDDLE		SUFFIX
					profes Comments		
30	MAILING ADDRESS			arr	STATE	POSTAL CODE	COUNTRY
. نات	1835 BLACK LAKE	: DI VO . S\M SI	INTE R	OLYMPIA	. WA	98512	USA
	1932 BLACK LAKE	DLAD" 244 2	OHEB				

4. This FINANCING STATEMENT covers the following collateral:

All contract rights, accounts, rental income, equipment, fixtures, improvements and personal property now or later attached to Borrower's real property or reasonably necessary to the use thereof, including, but not limited to, ranges, refrigerators, clothes washers, clothes dryers, or carpeting purchased or financed in whole or in part with loan funds, well water, water rights and water stock pertaining thereto, and all payments at any time owing to Borrower by virtue of any sale, lease, transfer, conveyance or condemnation of any part of said real property or any interest therein located on said property identified as:

Tax Parcel No. 4084-002-023-0000

See Block 16, UCC1Ad LOTS 13-23, BLK 2, FTIRSCH'S ADD TO BURLINGTON

5. ALTERNATIVE DESIGNATION (*applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYE	R AG. LIEN	NON-UCCFILING
6. This FINANCING STATEMENT is to be filed (for records) or recorded) in the REAL 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) ESTATE RECORDS. Attach Addendum (cotional) (cotional)	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA		
Villa Kathleen		

	ON RELATED FINANCING STAT	EMENI			
9a. ORGANIZATION'S NAME	<del></del>				
MERCY PROPERTIES WA		MIDDLE NAME, SUFFIX			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIUULE NAME, SUFFIX			
AISCELLANEOUS:					
			THE ABOVE SPACE	IS FOR FILING OFFI	CE USE ONLY
ADDITIONAL DEBTOR'S EXACT FU	LL LEGAL NAME - insert only one na	ame (11a or 11b) - do not abbrevi	ale or combine names		
11a. ORGANIZATION'S NAME	A Secretary Commencer of the Commencer o				
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
MAILING ADDRESS		ату	STATE	POSTAL CODE	COUNTRY
TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	111, JURISDICTION OF ORGAN	IZATION 11g. OR	GANIZATIONAL ID #, if a	iny N
ADDITIONAL SECURED PART 128. ORGANIZATION'S NAME	Y'S or ASSIGNOR S/P'S	NAME - insert only one name	(12a or 12b)		
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	]MIDDLE	NAME	SUFFIX
120. INDIVIDUALS DAST NAME					
		arr	STATE	POSTAL CODE	COUNTRY
MAILING ADDRESS		Samuel Jally	estern The Control of		
	timber to be cut or se-extracted	16. Additional collateral descri	ption:		
This FINANCING STATEMENT covers collateral, or is filed as a fixture filing.	timber to be cut or as-extracted	Lots 13 thro	ugh 23, Block 2, FRITS ON, according to the plage 78, records of Ska	at thereof recorded	in Volume
This FINANCING STATEMENT covers Collateral, or is filed as a fixture filing.	timber to be cut or as-extracted	Lots 13 thro BURLINGT 3 of Plats, p	ugh 23, Block 2, FRITS	at thereof recorded git Country, Washin	in Volume
This FINANCING STATEMENT covers Collateral, or is filed as a fixture filing.	timber to be cut or as-extracted	Lots 13 thro BURLINGT 3 of Plats, p	ugh 23, Block 2, FRITS ON, according to the plage 78, records of Ska	at thereof recorded git Country, Washin	in Volume
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collateral, or is filed as a fixture filing.  Description of real estate:  Name and address of a RECORD OWNER		Lots 13 through the BURLINGT 3 of Plats, positivate in Situate in	ugh 23, Block 2, FRITS ON, according to the pl age 78, records of Ska kagit County, Washing	at thereof recorded git Country, Washin on.	in Volume
This FINANCING STATEMENT covers collateral, or is filed as a fixture filing. Description of real estate:		Lots 13 through the BURLINGT 3 of Plats, positivate in Situate in	nd check gally one box.  Trustee scting with respect to	at thereof recorded git Country, Washin on.	in Volume

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