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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A NAME PHONE OF CONTACT AT FILER [optional]

Jan Willmering (509) 327-9634

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

UPF Incorporated 910 West Boone Ave. Spokane, WA 99201

GAS STOVE, T-STAT

Parcel No. P68033

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THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name	SEXACT FULL LEGAL NAME insert only one debtor name (1a or 1b) - do not abbreviate or combine names ANIZATION'S NAME IDDIAL'S LAST NAME William G CITY STATE POSTAL CODE COUNTRY WA 98284- USA SSN OR RIN ORGANIZATION DEBTOR NAL DEBTOR'S EXACT FULL LEGAL NAME insert only one debtor name (2a or 2b) - do not abbreviate or combine names ANIZATION'S NAME MIDDLE NAME MIDDLE NAME SUFFIX NONE NONE NONE NONE STATE POSTAL CODE COUNTRY NONE NONE NONE NONE NONE NONE SACTO WOOLLEY STATE POSTAL CODE COUNTRY NONE NONE NONE SOCIO WOOLLEY STATE POSTAL CODE COUNTRY USA SOCIO WOOLLEY SOCIO WOOLLEY SOCIO WOOLLEY SOCIO WOOLLEY SOCIO WOOLLEY SOCIO WOOLLEY SOCIO NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) NONE DEPARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) NONE DEBTOR DEBTOR DEBTOR DEBTOR SOCIONAME SOCIONA			
1a. ORGANIZATION'S NAME				
OR 1b. INDIVIDUAL'S LAST NAME		MIDDLE NAME	SUFFIX	
Lanphere	William	G		
1c. MAILING ADDRESS	partition The			
26948 Duffy Rd	Sedro Woolley	WA 98284-	USA	
	ATION 11. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any	•	
	2 / L/2	Ē	✓ NONE	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only or 2a, ORGANIZATION'S NAME	ne debtor name (2a or 2b) - do not abbreviate or comb	ine names		
OR 2b. INDIVIDUAL'S LAST NAME		MIDDLE NAME	SUFFIX	
Lanphere				
2c. MAILING ADDRESS				
26948 Duffy Rd				
ORGANIZATION	ATION 21. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASS 3a. ORGANIZATION'S NAME 1st Security Bank of Washington	SIGNOR S/P) - insert only one secured party name (3a	or 3b)		
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS	1 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □		į.	
PO Box 97000	Lynnwood	> WA 98046	USA	
4. This FINANCING STATEMENT covers the following collateral:				

5. ALTERNATE DESIGNATION [if applicable]:	LESSEE/LESSOR CONSIGNEE/CONSIGN	IOR BAILEE/BAILOR SELLER/B	BUYERAG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum	d (for record) in the REAL 7.Check to REQU [if applicable] [ADDITIONAL FI	JEST SEARCH REPORT(S) on Debtor(s) E) [optional]	All Debtors	ebtor 1 Debtor
8. OPTIONAL FILER REFERENCE DATA				
UPF Tracking #942752-7208	Loan #	SBA Loa	n#	

Lot 45, Block 2, PEAVEY'S ACRES, Skagit County, WA

UCC FINANCING STATEMEI	NT ADDENDUM					
FOLLOW INSTRUCTIONS (front and back) C NAME OF FIRST DEBTOR (1a or 1b) ON I		MENT				
9a. ORGANIZATION'S NAME	KEDALED HITAROLITO O TATE					
OR OF NORMAN AND ADDRESS OF THE						
AB' IMPIAIDONE 2 FAST MAME	FIRST NAME William	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS:						
			THE ABOVE S	PACE IS F	OR FILING OFFICE US	E ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL	LEGAL NAME - insert only one n	ame (11a or 11b) - do not abbrevi	ate or combine names			
11a. ORGANIZATION'S NAME	The second se					
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE N	IAME	SUFFIX
11c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
11d. ADD'L INFO RE ORGANIZATION DEBTOR	11e, TYPE OF ORGANIZATION	11f. JURISDICTION OF ORG	SANIZATION	11g. ORG	L ANIZATIONAL ID#, if any	NONE
2. ADDITIONAL SECURED PARTY'S	or ASSIGNOR S/P'S	NAME - insert only one name (12a or 12b)			··
12s. ORGANIZATION'S NAME						
DR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE N	IAMF	SUFFIX
125. 11011/03/12 9 2 10 1 11 11 11						
2c. MAILING ADDRESS		CITY	Service Service	STATE	POSTAL CODE	COUNTRY
		/_/			<u> </u>	<u> </u>
 This FINANCING STATEMENT covers timb collateral, or is filed as a fixture filing. 	per to be cut or as-extracted	16. Additional collateral description	ription:			
4. Description of real estate:						
Lot 45, Block 2, Peavey's Acres						
APN: P68033						
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			***	and the second	97	
				Ú.		
						<u>.</u>
Name and address of a RECORD OWNER of all	bove-described real estate					
5. (if Debtor does not have a record interest):						
		17. Check only if applicable a	and check only one bo	(.		111
		Debtor is a Trust or			rty held in trust or Dece	dent's Estate
		18. Check only if applicable a	and check <u>only</u> one bo			
		Filed in connection with a		, — 40e ····· -	era maine d'imi è erat d'imi prem 1776 d'Afri	Pre junium en en
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