



Skagit County Auditor

8:41AM

UCC FINANCIN	G STATEM	ENT		5/24	/2011	age 1	of 1 8:4
A. NAME & PHONE OF							
	ALIENT TO A						
B. SEND ACKNOWLED	GMENTIO: (Nan	ne and Address)					
Salal Credi		\ \	1				
PO Box 193		<i></i>					
Scattle, WA	<b>x</b> 98109						
	And the second		į				
1							
	No. of the Control of		1				
-		and the second second	-1	THE ABOVE SPA	CE IS FOR	FILING OFFICE L	JSE ONLY
1. DEBTOR'S EXACTE	ULL LEGAL NAME	insert only one debtor name (1a or 1b)	do not abbreviate or combine r				
1a. ORGANIZATION'S I							
OR 16, INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX	
RUNDLE			KENNETH				
1c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
	OOZZ DD		JN:	N T T T T T	-/		
9299 CLAYBE			SEDRO WOO			98284	
1d, SEE INSTRUCTIONS	ORGANIZATION	1e. TYPE OF ORGANIZATION	1f, JURISDICTION OF ORG	SANIZATION	1g. ORGANIZATIONAL ID #, if any		_
	DEBTOR	<u> </u>					NON
		. LEGAL NAME - insert only one de	btor name (2a or 2b) - do not	abbreviate or combine	names		
2a. ORGANIZATION'S I	NAME						·
OR 26. INDIVIDUAL'S LAS	TNAME		FIRST NAME		MIDDLE NAME		SUFFIX
RUNDLE			JACKIE	<b>\</b>			
2c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
9299 CLAYBR	OOK DD		SEDRO WOO	TIEV	WA	98284	
2d SEEINSTRUCTIONS		2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORG			NIZATIONAL ID#, if an	I
	ORGANIZATION			A STATE OF THE STA			_
	DEBTOR						NONE
		TOTAL ASSIGNEE of ASSIGNOR S/P	-insert only <u>one</u> secured party	name (3a or 3b)			
3a. ORGANIZATION'S I			1	Samuel Salah S			
OR Salal Credit	Union		·-	Samuel of Samuel	<u> </u>		
OR 3b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLEN	AME	SUFFIX	
	<u> </u>				4/2		
3c, MAILING ADDRESS			CITY			POSTAL CODE	COUNTRY
PO Box 19340			Seattle	18. July 2	WA	98109	

## 24' X 36' POST FRAME BUILDING

APN: P119595

LEGAL: INCLUDING MANUFACTURED HOME 2005 SKYLINE GREENBRIAR 66X27 SERIAL NUMBER 21910263T, LOT B OF SKAGIT COUNTY SHORT PLAT PL02-0022-REV, RECORDED UNDER AUDITOR'S FILE NUMBER 200412020095, LOCATED IN THE SOUTHEAST QUARTER OF THE NORTHWEST QUARTER, SECTION 19, TOWNSHIP 35, RANGE 5, COUNTY OF SKAGIT, STATE OF WASHINGTON

5. ALTERNATIVE DESIGNATION [if applicate	le]: LESSEE/LESSOR CO	ONSIGNEE/CONSIGNOR E	BAILEE/BAILOR SELLER/BUYER	AG. LIEN NON-UCCFILING
<ol> <li>This FINANCING STATEMENT is to be ESTATE RECORDS. Attach Addend</li> </ol>	filed [for record] (or recorded) in the l lumif ar	REAL 7. Check to REQUES [ADDITIONAL FEE	T SEARCH REPORT(S) on Debtor(s)  Toptional	All Debtors Debtor 1 Debtor 2
				The state of the s

<sup>4.</sup> This FINANCING STATEMENT covers the following collateral: