



201109210003  
Skagit County Auditor

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**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

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B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Salal Credit Union**  
**PO Box 19340**  
**Seattle, WA 98109**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

1a. ORGANIZATION'S NAME						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
	<b>STILL</b>		<b>JEFFERY</b>			
1c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
<b>420 N 18TH PL</b>			<b>MOUNT VERNON</b>	<b>WA</b>	<b>98273</b>	
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any		<input type="checkbox"/> NONE

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names**

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
	<b>STILL</b>		<b>IVA</b>			
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
<b>420 N 18TH PL</b>			<b>MOUNT VERNON</b>	<b>WA</b>	<b>98273</b>	
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any		<input type="checkbox"/> NONE

**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)**

3a. ORGANIZATION'S NAME						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
	<b>Salal Credit Union</b>					
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
<b>PO Box 19340</b>			<b>Seattle</b>	<b>WA</b>	<b>98109</b>	

4. This FINANCING STATEMENT covers the following collateral:

**9 OLYMPIC WINDOWS & 2 DOORS**

**APN: P81365**

**LEGAL: SECTION 20 TOWNSHIP 34N RANGE 4E QUARTER NE, LOT 18, HIGHLAND GLEN DIV NO. 4, RECORDED IN VOLUME 12 OF PLATS, PAGE 51, RECORDS OF SKAGIT COUNTY, WASHINGTON**

5. ALTERNATIVE DESIGNATION (if applicable)	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING	
6. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (if applicable)		(ADDITIONAL FEE)	(optional)	All Debtors	Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA							