



201204270006

Skagit County Auditor

4/27/2012 Page 1 of 1 8:39AM

### UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**NORTH COAST CREDIT UNION**  
**1100 DUPONT STREET**  
**BELLINGHAM, WA 98225**

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>NELSON</b>               | <b>MARIE</b>                      |                          |   |
| 1c. MAILING ADDRESS         |                                   | CITY                     | STATE POSTAL CODE COUNTRY                                     |
| <b>PO BOX 636</b>           |                                   | <b>CONWAY</b>            | <b>WA 98238</b>   |
| 1d. <u>SEE INSTRUCTIONS</u> | 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>NELSON</b>               | <b>STANLEY</b>                    | <b>E</b>                 |   |
| 2c. MAILING ADDRESS         |                                   | CITY                     | STATE POSTAL CODE COUNTRY                                     |
| <b>PO BOX 636</b>           |                                   | <b>CONWAY</b>            | <b>WA 98238</b>   |
| 2d. <u>SEE INSTRUCTIONS</u> | 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/SIP) - insert only one secured party name (3a or 3b)

|                                 |            |                   |                           |
|---------------------------------|------------|-------------------|---------------------------|
| 3a. ORGANIZATION'S NAME         |            |                   |                           |
| <b>NORTH COAST CREDIT UNION</b> |            |                   |                           |
| OR                              |            |                   |                           |
| 3b. INDIVIDUAL'S LAST NAME      | FIRST NAME | MIDDLE NAME       | SUFFIX                    |
|                                 |            |                   |                           |
| 3c. MAILING ADDRESS             |            | CITY              | STATE POSTAL CODE COUNTRY |
| <b>1100 DUPONT STREET</b>       |            | <b>BELLINGHAM</b> | <b>WA 98225</b>           |

4. This FINANCING STATEMENT covers the following collateral:

**TRACT 2 SHORT PLAT NO. 49-79 APPROVED AUGUST 15, 1979 RECORDED SEPTEMBER 4, 1979 IN BOOK 3 OF SHORT PLATS, PAGE 173 UNDER AUDITOR'S FILE NO. 7909040029 AND BEING A PORTION OF THE NORTH 1/2 OF THE SOUTHEAST 1/4 OF SECTION 11, TOWNSHIP 33 NORTH, RANGE 3 EAST, W.M. TOGETHER WITH AN EASEMENT FOR EXISTING SEPTIC SYSTEM DRAINFIELD OVER THAT PORTION OF TRACT 3 AS SHOWN ON THE FACE OF THE SHORT PLAT. SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.**

**PARCEL NO.: 330311-4-012-0003 (P15751)**

|   |  |  |  |                                       |                                   |   |
|---|--|--|--|---------------------------------------|-----------------------------------|---|
| 5. ALTERNATIVE DESIGNATION (if applicable):   | <input type="checkbox"/> LESSEE/LESSOR                       | <input type="checkbox"/> CONSIGNEE/CONSIGNOR | <input type="checkbox"/> BAILEE/BAILOR   | <input type="checkbox"/> SELLER/BUYER | <input type="checkbox"/> AG. LIEN | <input type="checkbox"/> 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) (optional) |  | <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2 |                                       |                                   |   |
| 8. OPTIONAL FILER REFERENCE DATA  |  |  |  |                                       |                                   |   |