

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS



201307310029

Skagit County Auditor

\$72.00

7/31/2013 Page

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1 10:02AM

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-866-484-2382	
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
78369523 - 375680	Filed In: Washington (Skagit)
Corporation Service Company	
801 Adlai Stevenson Drive Springfield, IL 62703	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME			
OR	1b. INDIVIDUAL'S SURNAME PAQUE		
	FIRST PERSONAL NAME JOSEPH	ADDITIONAL NAME(S)/INITIAL(S) B	SUFFIX
1c. MAILING ADDRESS 19956 PARKRIDGE LANE		CITY SEDRO WOOLLEY	STATE WA
		POSTAL CODE 98284	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME			
OR	2b. INDIVIDUAL'S SURNAME		
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE
		POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME 1st Security Bank of Washington			
OR	3b. INDIVIDUAL'S SURNAME		
	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P. O. Box 97000		CITY Lynnwood	STATE WA
		POSTAL CODE 98046	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
13 WINDOWS

APN: P50523

LEGAL: TRACT 8 OF SKAGIT COUNTY SHORT PLAT NO. 518-81, AS APPROVED JULY 6, 1981, AND RECORDED JULY 7, 1981, IN VOLUME 5 OF SHORT PLATS, PAGES 91 THROUGH 93, UNDER AUDITOR'S FILE NO. 8107070003, RECORDS OF SKAGIT COUNTY, WASHINGTON; BEING A PORTION OF SECTION 32, TOWNSHIP 36 NORTH, RANGE 4 EAST OF THE WILLIAMETTE MERIDIAN, SITUATE IN SKAGIT COUNTY, WASHINGTON

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:
 Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:
 Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA: :5150662720 PAQUE

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