

[REDACTED]

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY



201403140012

Skagit County Auditor \$72.00  
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A. NAME & PHONE OF CONTACT AT FILER [optional]

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>UYENO</b>		<b>RONNIE</b>	<b>Y</b>	
1c. MAILING ADDRESS				
<b>13291 SIGNE ROAD</b>		CITY	STATE	POSTAL CODE
<b>13291 SIGNE ROAD</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>UYENO</b>		<b>LINDA</b>	<b>E</b>	
2c. MAILING ADDRESS				
<b>13291 SIGNE ROAD</b>		CITY	STATE	POSTAL CODE
<b>13291 SIGNE ROAD</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				
<b>PO Box 19340</b>		CITY	STATE	POSTAL CODE
<b>PO Box 19340</b>		<b>Seattle</b>	<b>WA</b>	<b>98109</b>

4. This FINANCING STATEMENT covers the following collateral:

**8 x 8 LANDING TO EXISTING DECK, PLUMBING BOOT ON ROOF, UP TO 8 FT OF REPLACEMENT DECKING**

APN: P116648

LEGAL: (0.9800 Ac) Lot 2 Short Plat#99-0033 Af#200003210085 Located In Sw1/4 Nw1/4, COUNTY OF SKAGIT, STATE OF 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 (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	All Debtors	Debtor 1	Debtor 2		
8. OPTIONAL FILER REFERENCE DATA						