



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294 B. E-MAIL CONTAGT AT FILER (optional) SPRFiling@cscinfo.com C. SEND ACKNOWLED@MENT TO: (Name and Address) 91732070 - 344670 Corporation Service Company 801 Adlai Stevenson Drive

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Skagit	County	Aud	itor					

\$73.00 10/3/2014 Page 1 of 2 8:42AM

	Springfielα, IL 62703 Filed In: W	vashington .				
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_	DEDTODIC MANE				·	
	DEBTOR'S NAME: Provide only one Debtor name (3a or 1b) (use exact, full n	•				
		he Individual Debtor information in item 10	or the Financing 5	tatement Addendum (Form U	CC1A0)	
	19. ORGANIZATION'S NAME COMMUNION CHURCH					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)		
Ic.	MAILING ADDRESS 208 SNOQUALMIE STREET	MOUNT VERNON	STATE WA	POSTAL CODE 98273	USA	
	DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use exact full name will not fit in line 2b, leave all of item 2 blank, check here and provide to a Carona Caron	agrie; de not omit, modify, or abbreviate an he tridividual Debtor information in item 10				
ЭR	26. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITK	ADDITIONAL NAME(S)/INITIAL(S)		
2c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
3. 8	SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECUR	RED PARTY): Provide only one Secured P	arty name (3a or 3	b)	•	
	3a. ORGANIZATION'S NAME Skagit Bank		No. of Concession, Name of Street, Name of Str			
⊃R	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX	
3c.	MAILING ADDRESS 301 E. Fairhaven Ave	CITY	STATE	POSTAL CODE	COUNTRY	
		Burlington	WA	98233	USA	
	COLLATEDAL THE STATE OF THE STA		Year add	η,		

All Accounts, Equipment, General Intangibles and Fixtures located at 1003 S 3rd Street, 1005 S. 3rd Street and 208 Snoqualmie Street, Mount Vernon, WA 98273PARCEL A:Lots 2, 3 and 4, Block 9, Riverside Addition to the Town of Mount Vernon," as per plat recorded in Volume 3 of Plats, page 24, records of Skagit County, Washington. Situate in the City of Mount Vernon, County of Skagit, State of Washington.PARCEL B:The North 1/2 of Lots 5 and 6 and the North 19.50 feet of Lots 7 and 8, "Riverside Addition to the Town of Mount Vernon," as per plat recorded in Volume 3 of Plats, page 24, records of Skagit County, Washington, EXCEPT that portion of the West 30.00 feet of said Lot 6 lying South of the North 19.50 feet thereof. Situate in the City of Mount Vernon, County of Skagit, State of Washington. Parcel numbers: P54186, P54187, P54188

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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 <u>only</u> if applicable and check <u>only</u> one box:	6b. Check only if applicable and check only one box	e
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Paing	ø
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/B	uyer Bailee/Bailor Licensee/Licensor	2
8. OPTIONAL FILER REFERENCE DATA: :Communion Church	0.4-26-70	•

91732070

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name od not fit, check here 9a. ORGANIZATION'S NAME COMMUNION CHURCH 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Employ name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name) do not omit, modify, or abbreviate any part of the Dabtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b, INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS COUNTRY STATE POSTAL CODE CITY 11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a, ORGANIZATION'S NAME FIRST PERSONAL MAME 11b. INDIVIDUAL'S SURNAME SUFFIX ADDITIONAL NAME(S)/INITIAL(S) 11c. MAILING ADDRESS POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral is filed as a fixture filing 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate; (if Debtor does not have a record interest) PARCEL A:Lots 2, 3 and 4, Block 9, "Riverside Addition to the Town of Mount Vernon," as per plat recorded in Volume 3 of Plats, page 24, records of Skagit County, Washington Situate in the City of Mount Vernon, County of Skagit, State of Washington PARCEL B:The North 1/2 of Lots 5 and 6 and the North 19.50 feet of Lots 7. and 8, "Riverside Addition to the Town of Mount Vernon," as per **Skagit County Auditor** \$73.00 plat recorded in Volume 3 of Plats, page 24, records of Skagit 10/3/2014 Page 2 of 2 8:42AM County, Washington, EXCEPT that portion of the West 30,00 feet of said Lot 6, lying South of the North 19.50 feet thereof. Situate

17. MISCELLANEOUS: