

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) <b>Krystal Detroy 360-685-4046</b>
B. E-MAIL CONTACT AT FILER (optional) <b>kdetroy@northcoastcu.com</b>
C. SEND ACKNOWLEDGMENT TO: (Name and Address)  <b>North Coast Credit Union 1100 Dupont Street Bellingham, WA 98225</b>



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Skagit County Auditor

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7/13/2015 Page

1 of

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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 <b>Taylor</b>	FIRST PERSONAL NAME <b>Richard</b>	ADDITIONAL NAME(S)/INITIAL(S) <b>Alan</b>	SUFFIX
1c. MAILING ADDRESS <b>8635 Arnold Lane</b>	CITY <b>Concrete</b>	STATE <b>WA</b>	POSTAL CODE <b>98237</b>	COUNTRY <b>USA</b>

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 <b>North Coast Credit Union</b>				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS <b>1100 Dupont Street</b>	CITY <b>Bellingham</b>	STATE <b>WA</b>	POSTAL CODE <b>98225</b>	COUNTRY <b>USA</b>

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

**Parcel ID#350815-4-006-0109 P43975**

The Northeast 1/4 of the Northwest 1/4 of the Southeast 1/4 of Section 15, Township 35 North, Range 8 East, W.M., EXCEPT the North 20 feet thereof and ALSO EXCEPT that portion lying within that certain 40 foot strip of land running through the center of the Northwest 1/4 of the Southeast 1/4 as conveyed by deed recorded April 23, 1969, under Auditor's File No. 725675 AND ALSO EXCEPT the South 202 feet thereof; TOGETHER WITH that certain 40 foot easement for ingress, egress and utilities as set forth in Declaration of Easement recorded February 13, 1974 under Auditor's File No. 796709, records of Skagit County, Washington.

**Parcel ID#350815-4-006-0800 P113111****MANUFACTURED HOME ONLY 1998 PALMHARBOR 56X27 SERIAL NUMBER PH202115 MODEL NUMBER 1057 LOCATED ON P43975**

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensee	
8. OPTIONAL FILER REFERENCE DATA:	