

UCC FINANCING STATEMENT FOLLOWINS FRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional)			200027	¢ 72.00	
Nicole Heinrich		t County Auditor		\$73.00	
B. E-MAIL CONTACT AT FILER (optional)	10/20/	2015 Page	1 of 1 5	9:35AM	
nheinrich@comeast.net					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
North Coast Credit Union 1100 Dupont Street Bellingham, WA 98225		POWE SPACE IS EQU	D SILING OFFICE LIGE	OMI V	
DEBTOR'S NAME: Provide only one Debtor rame (Ta or 10) (use exact, full)			R FILING OFFICE USE		
	the Individual Debtor information in item				
1a, ORGANIZATION'S NAME					
OR 16, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
Campbell	Bienvenida	Rosa	sena	1	
1c. MAILING ADDRESS 792 Reanna Place	Burlington	STATE WA	98233	COUNTRY	
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)					
28. ORGANIZATION'S NAME	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
OR 2b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	AL NAME(S)/INITIAL(S)	SUFFIX	
Campbell	Robert	Dune	can		
2c. MAILING ADDRESS	CITY		POSTAL CODE	COUNTRY	
792 Reanna Place	Burlington	WA	98233	<u> </u>	
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 North Coast Credit Union		- Company of the state of the s			
OR 3b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	TARRITION	NAL NAME(S)/INITIAL(S)	TSUFFIX	
S. Harrison C. S. S. Harrison	THO TEXASOLUTION OF THE PARTY O	ALCOHOL MANAGEMENT	WILL TANKILLO (MITTINE (U)	1301712	
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
1100 Dupont Street	Bellingham	WA	98225		
4. COLLATERAL. This financing statement covers the following collateral: LOT 6, "RIO VISTA MEADOWS," AS PER PLAT RECORDED ON AUGUST 21, 2008, UNDER AUDITOR'S FILE NO. 200008210119, RECORDS OF SKAGIT COUNTY, WASHINGTON. SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON. 4758-000-006-0000					
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5. Check only if applicable and check only one box: Collateral is	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	Agricultural Lien Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyı	er Bailee/Bailor Licensee/Licensor	
8 OPTIONAL ELLER RESERENCE DATA:		