



Skagit County Auditor

\$73.00

11/12/2015 Page

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1 12:37PM

A NAME & PHONE OF CONTACT AT FILER (optional)

Diana Norberg (509) 327-9634

B. E-MAIL CONTACT AT FILER (optional)

dianan@upfservices.com

c. SEND ACKNOWLEDGMENT TO: (Name and Address)

UPF Services

12410 E. Mirabeau Parkway. Ste 100

12410 E. Mirabeau Parkway, Ste 100 Spokane Valley, WA 99216	THE ABOVE SPAC	E IS FOR FILING OFFICE USE ON	JLY				
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact full na riame will not fit in line 1b, leave all of item 1 blank, check here), and provide	me; do not omit, modify, or abbreviate any part of the	he Debtor's name); if any part of the Indiv	ridual Debtor's				
1a. ORGANIZATION'S NAME							
16. INDIVIDUAL'S SURNAME NEWMAN KENNEDY	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
1c MAILING ADDRESS 2806 Highland Dr	Anacortes	STATE POSTAL CODE WA 98221	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 in and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)							
2a. ORGANIZATION'S NAME							
KENNEDY	JESSE JESSE	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
2806 Highland Dr	Anacortes	STATE POSTAL CODE WA 98221	COUNTRY				
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR 3a ORGANIZATION'S NAME Puget Sound Cooperative Credit Union		party name (3a or 3b)					
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
3c. MAILING ADDRESS 600 108th Ave NE Suite #1035	Bellevue	STATE POSTAL CODE WA 98004	COUNTRY				
4. COLLATERAL: This financing statement covers the following collateral: 1. SOLECTRIA INVERTER, 6.325KW SOLAR: 23 ITEK PANELS, ALONG WITH AFTER ACQUIRED FIXTURES PERTAINING TO ENERGY EFFICIENCY UPGRADES AT THE PROPERTY LOCATED AT: 2608 HIGHLAND DR, ANACORTES, WA 98221 AS DOCUMENTED ON SUBSEQUENT LOAN DISBURSEMENT FORM(S).							
LEGAL: TRACT 8, SKYLINE NO. 4, ACCORDING TO THE PLAT THEREOF, RECORDED IN VOL. 9 OF PLATS, PG.61, RECORDS OF SKAGIT COUNTY, WASHINGTON.							
APN: P59223							

5. Check only if applicable and check only one i	box: Collateral is held in a Ti	rust (see UCC1Ad, item 17 and	Instructions)	being administered by a Dece	eden't Personal Representative
6a Check only if applicable and check only one box:			6b Check only if applicable and check only one box:		
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Trasmittir	ng Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATE DESIGNATION (if applicable):	Lessee/Lessor	Consignee/Consignor	Seller/Buy	er Bailee/Bailor	Licensee/Licerisor
B. OPTIONAL FILER REFERENCE DATA					
UPF Tracking #3019306-29877	Loar	n #		SBA Loan #	