



Skagit County Auditor 0/42/2016 Page

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UCC FINANCING STATEMENT		3/12/2010 1 49	-		
FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5	294				
B. E-MAIL CONTACT AT FILER (optional) SPRFilling@cscinfo.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
119759908 - 375680	¬ [
Corporation Service Company 801 Adlai Stevenson Drive	1				
Springfield, IL 62703	ed In: Washington				
	(Skagit)	THE ABOVE	SPACE IS FO	R FILING OFFICE USE (ONLY
DEBTOR'S NAME: Provide only one Debter name (18 or 1b) (use a name will not fit in line 1b, leave all of item 1 blank, check here.	xact, full name; do not omit, n provide the Individual Debtor	nodify, or abbreviate any pa	art of the Debtor	s name); if any part of the In	dividual Debtor's
1a. ORGANIZATION'S NAME					
OR 15. INDIVIDUAL'S SURNAME HOTO	FIRST PERSONAL	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
1c. MAILING ADDRESS 1913 Island View Place	Anacortes	<u> </u>	STATE WA	POSTAL CODE 98221	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use ea	eact full same: de not omit n	nortify or abbreviate any p	art of the Debtor	s name): if any part of the In-	fividual Debtor's
	provide the Individual Debtor				
2a. ORGANIZATION'S NAME	The state of the s		-		
2b. INDIVIDUAL'S SURNAME Horn	FIRST PERSONAL Ruth	FIRST PERSONAL NAME Ruth		ADDITIONAL NAME(S)/INITIAL(S)	
2c. MAILING ADDRESS 1913 Island View Place	city Anacortes		STATE	POSTAL CODE 98221	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNEE	OR SECURED PARTY): Prov	ide only one Secured Party	name (3a or 3b)	•
3a. ORGANIZATION'S NAME 1st Security Bank of Wash	nington				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
0. 115/1150/125 05/110/11E	111011211001111				
3c. MAILING ADDRESS P. O. Box 97000	CITY Lynnwood		STATE	POSTAL CODE 98046	COUNTRY
A COLLATERAL THE TOTAL THE				90040	UUA
 COLLATERAL: This financing statement covers the following collatera ROOF 	I;	A STATE OF THE STA	A STATE OF THE STA		
				and the second s	
APN: P57665					
LOT 13, EXCEPT THE WEST 30 FEET THER					
VIEW PARK NO. 2, ANACORTES, WASHING		AT RECORDED	IN VOLU	ME 7 OF PLATS,	PAGE 78,
RECORDS OF SKAGIT COUNTY, WASHING	TON.				
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5 Chack only if analicable and shock only and have Calletons in The late.	n Trust (enn MCC4Ad item	17 and Instructional	haina administr	and by a Donad-at's Donat-	I Sagrasantoise
Check only if applicable and check only one box: Collateral isheld in 6a. Check only if applicable and check only one box:	ra irust (see UCC1Ad, item '			red by a Decedent's Persona f applicable and check <u>onli</u> st	
Public-Finance Transaction Manufactured-Home Transa-	ction A Debtor is a	Transmitting Utility		ural Lien Non-UCC	and the same
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consigno	or Seller/Buyer	r Ba	lee/Bailor Licen	see/Licensor
8. OPTIONAL FILER REFERENCE DATA: :Horn - 5151005	890				44075000

119759908

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 did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Horn FIRST PERSONAL NAME Elmer ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only ane additional Debtor 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 Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS STATE POSTAL CODE CVIY COUNTRY ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11. ADDITIONAL SECURED PARTY'S NAME OF 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/IN(TIAL(S) SUFFIX 11c. MAILING ADDRESS STATE 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 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): 17. MISCELLANEOUS: