



Skagit County Auditor 9/19/2016 Page 1 of 1 \$73.00 9:15AM

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
**Maggie Krelle 206.298.9394 x8903**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Salal Credit Union  
 PO Box 19340  
 Seattle, WA 98109**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX  
**SPITALI VICTOR JOSEPH JR**

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
**13931 DONNELL RD ANACORTES WA 98221 USA**

1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any  NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX  
**SPITALI SANDRA LEE**

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
**13931 DONNELL RD ANACORTES WA 98221 USA**

2d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any  NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME

OR

3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX  
**Salal Credit Union**

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
**PO Box 19340 Seattle WA 98109**

4. This FINANCING STATEMENT covers the following collateral:

**INSTALLED ROOF REPLACEMENT ON GARAGE GAF TIMBERLINE HD HICKORY PER LEGENDS ROOFING CO INC INVOICE #51947 DATED 8/31/2016**

**Parcel P19269**

**QUARTER 03 SECTION 12 TOWNSHIP 34 RANGE 01  
 Legal (2.0000 ac) TRACT A OF SHORT PLAT #10-73 SW1/4 SW1/4  
 COUNTY OF SKAGIT STATE OF WASHINGTON**

**13931 DONNELL RD ANACORTES, WA 98221**

5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6.  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA