

## 201612010006

Esage County Auditor

\$73.00

12/1/2016 Page

1 of

1 8:56AM

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	

1							
<u> </u>		No. of the last of		THE ABOVE SPA	ACE IS FO	R FILING OFFICE U	SE ONLY
		insectionly one debtorname (1	a or 1b) - do not abbreviate or combine	name#		<del> </del>	
1a. ORGANIZATION'S N	AME *						
16. INDIVIDUAL'S LASTI	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
GRIMBERG			<b>JAMES</b>				COUNTRY
: MAILING ADDRESS		Market and the state of the sta	CITY		STATE	POSTAL CODE	
0346 STATE RT	E 534	and the second second	MOUNT VERM	NON	WA	98274 ANIZATIONAL ID #, if an	USA
. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION	1e. TYPE OF ORGANIZATE	11. JURISDICTION OF OR	RGANIZATION	1g. ORG	ANIZATIONAL IO P. II III	
	DEBTOR	1					NON
		LEGAL NAME - insert on	y <u>sne</u> debtor name (2a or 2b) - do no	ot abbreviate or combine	names	<del></del>	<u>.</u>
2a. ORGANIZATION'S N	AME						
R 2b. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
GRIMBERG			BEULAH				
MAILING ADDRESS		<u></u>	CITY		STATE	POSTAL CODE	COUNTRY
20346 STATE RT	E 534		MOUNT VERN	ION	WA	98274	
SEE INSTRUCTIONS	ADD'L INFO RE	2e. TYPE OF ORGANIZATI	ON 21. JURISDICTION OF OF	REANIZATION	2g. ORG.	ANIZATIONAL ID #, if an	
	ORGANIZATION DEBTOR	I					NON
SECURED PARTY'S	NAME (or NAME of	TOTAL ASSIGNEE & ASSIGN	iOR S/P) - insert only <u>one</u> secured pa	ty name (3ao 3b)			
3a. ORGANIZATION'S N	IAME						
Salal Credit U			IFIRST NAME		MIDDLE	NAME	SUFFIX
3b. INDIVIDUAL'S LAST	NAME		FIRST HAME		\		
c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
PO Box 19340			Seattle	A Samuel Comment	WA	98109	
This FINANCING STATEM	ENT seem the follow	dna colleteral:	Deattie				
		_	R WASHINGTON EN	TDCV SERVI	ES IN	OFCE DATED	9/9/2016
INSTALLED HO	NEYWELL C	SENERATUR PE	K WASHINGTON EN	ergi serti		DILLE -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
APN: P121201							
APN; F121201						1//	
SECTION 21 TO	WNSHIP 33N	RANGE 04E QU	ARTER NW			A Second	
LECAL: (Title Eli	mination) Inc	luding Manufactu	red Home 2004 Fleetw	ood Barrington	64X40	Serial Number	
W-642119406ba1	3. I of 2 Of Si	kagit County Shor	t Plat No. Pl-03-0094 F	tecorded Under	Audito	r's kije Numbel	
200311140221. Be	ing A Portion	Of The Northwes	t 1/4 Of The Northwes	t 1/4 Of Section	21, Tov	vnship 33 North	i, Range 4
East.							
	AGIT STATE	OF WASHINGT	ON				
						The second like	
)0346 State RTE	534 MOUNT	VERNON. WA 98	274				1 / / / A
. ALTERNATIVE DESIGNA		LESSEE/LESSOR	CONSIGNEE/CONSIGNOR		SELLER/BL		NON-UCC FILIN
TATHIS FINANCING STA	EMENT is to be filled	for recordi (or recorded) in	he REAL 7. Check to REQUE applicable ADDITIONAL FE	ST SEARCH REPORTS	s) on Debtor tionali	(s) All Debtors	Debtor 1 Sabtor
MI ESTATE RECORDS. OPTIONAL FILER REFER	ENCE DATA		THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAM				