



Skagit County Auditor

SBA Loan #

\$73.00

6/21/2017 Page

1 of

110:29AM

UCC FINANCING STATEMENT			
FOLLOW INSTRUCTIONS			
A NAME & PHONE OF CONTACT AT FILER	(optional)		
Diana Norberg 🖊 📗	(509) 327-9634		

Diana Norberg

B. E-MAIL CONTACT AT FILER (Optional)

dianan@upfservices.com

C. SEND ACKNOWLEDGMENT FO: (Name and Address)

UPF Services	1]		
12410 E. Mirabeau Parkway, Ste	100		
Spokane Valley, WA 99216	, [
	THE ABOVE \$	PACE IS FOR FILING OFFICE USE O	DNLY
1. DEBTOR'S NAME: Provide only one Debtor name (1st or 1b) (use of name will not fit in line 1b, leave all of item 1 blank, check here			
1a. ORGANIZATION'S NAME	sa provide the individual bedox mornation in term to t	ine Financing Statement Addengum (Form	·
OR —			
16. INDIVIDUAL'S SURNAME BOYD	SANFORD	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
12397 Huckleberry Ln	Sedio Woolley	STATE POSTAL CODE WA 98284-	COUNTRY
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use a name will not fit in line 2b, leave all of item 2 blank, check here			
2a. ORGANIZATION'S NAME	and provide the individual Deptor Information in item 10 0	If the Financing Statement Addendum (Form	
OR OF THE PROPERTY OF THE PROP			
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of	ASSIGNOR SECURED PARTY): Provide only one sec	ured party name (3a or 3b)	
38 ORGANIZATION'S NAME Puget Sound Cooperative Credit	Union		
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	USA
4. COLLATERAL; This financing statement covers the following coll			UUA
9.3 KW SOLAR: 38 ITEK PANELS AND 1.5	SOLECTRIA PVI 7600 TL INVERT		
ACQUIRED FIXTURES PERTAINING TO S			
AT: 12397 HUCKLEBERRY LN, SEDRO W DISBURSEMENT FORM(S).	OOLLEY, WA 98284 AS DOCUM	ENTED ON SUBSEQUENT	LUAN
• •			
LEGAL: TRACT 1 OF SKAGIT COUNTY SI			
RECORDED AUGUST 13, 1975, IN VOL. 1 PORTION OF THE SE ¼ OF THE NE ¼ IN			\
WASHINGTON.	. GEG. 6, 10414, 113E, 01-111E VV.	W., IN GIVAGIT, GOOM FI,	S
ABM BOSSET			
APN: P30087			
5. Check any if applicable and check any one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Deceden't Personal Representative			
6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Tra	ensaction A Debtor is a Trasmitting Utility	6b. Check <u>only</u> if applicable and check <u>only</u> Agricultural Lien Non-U	grie box: JCC Filing
7. ALTERNATE DESIGNATION (if applicable): Lessee/Lesse			ee/Licansor

Loan#

8. OPTIONAL FILER REFERENCE DATA UPF Tracking #4020299-35834