

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS



A NAME & PHONE OF CONTACT AT FILER (optional)		201710060041			A 1881
Diana Norberg / (509) 327-963	34	Skagit County Auditor			\$74.00
B. E-MAIL CONTAGE AT FILER (aptional)		10/6/20 ⁻	7 Page	1 of	1 10:58AM
dianan@upfservices.com			_		MARC:01
C. SEND ACKNOWLEDGMENT TO (Name and Address)					
Tupe our in a	-				
UPF Services	•				
12410 E. Mirabeau Parkway, Ste 100					
Spokane Valley, WA 99216					
		THE ABOVE SP	ACE IS FOR EII	LING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (15 or 15) (use exact full	name: do not pmit, mo				
name will not fit in line 1b, leave all of item 1 blank, cleek hereand prov					
1a. ORGANIZATION'S NAME	ķ ·				
DR 1b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUF		SUFFIX
ADAMS	// JON		∣R		
1c. MAILING ADDRESS	CITY			STAL CODE	COUNTRY
424 WIDNOR DR		VERNON	WA 9		USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact will					
name will not fit in line 2b, leave all of item 2 blank, check here : and prov	de iste individual Debi	tor information in item 10 of t	ne Financing State	ement Addendum (For	m UCC1Ad)
2a, ORGANIZATION'S NAME					
OR : 2b. INDIVIDUAL'S SURNAME	FIRST PERSON	SI NYRAC	ADDITIONAL	NAME(S)/INITIAL(S)	CHEEN
20. INDIVIDUAL 3 SURNAWIE	FIRST PERSUM	AL BAME	ADDITIONAL	- NAME(S)/INTTIAC(S)	SUFFIX
: c. MAILING ADDRESS	CITY		STATE PO	STAL CODE	COUNTRY
is, with the ribbiness	W. W.		011112 12	OTAL OODL	USA
B. SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of ASSIGN	IOR SECURED PART	() Provide only one secur	ed nady name /35	or 3h)	
3a. ORGANIZATION'S NAME	OR DECORED FART	, , , teviles only <u>ente</u> securi	od party martie (Sa	or on)	
Puget Sound Cooperative Credit Unio	n				
3b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX
: 		A port	and the same of th		
3c. MAILING ADDRESS	CITY			STAL CODE	COUNTRY
600 108th Ave NE Suite #1035	Bellevue		WA 9	8004	USA
4. COLLATERAL: This financing statement covers the following collateral:		The state of the s	all the second		
TRANE HEAT PUMP, ALONG WITH AFTER AC	CQUIRED FIX	TURES PERTAI	YING TO F	NERGY EFF	CIENCY
UPGRADES AT THE PROPERTY LOCATED A	T: 424 WIDNO	OR OR MOUNT'	VERNON Y	<i>N</i> A 98274 AS	;
		J. (D. (, 1410 0 1 1 1	F		
	BURSEMENT				
DOCUMENTED ON SUBSEQUENT LOAN DISE		FORM(S).			
DOCUMENTED ON SUBSEQUENT LOAN DISE LEGAL: LOT 21, WINDOR DRIVE, ACCORDING	G TO THE PL	FORM(S).			
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DOCUMENTED ON SUBSEQUENT LOAN DISE LEGAL: LOT 21, WINDOR DRIVE, ACCORDING PG. 104, IN SKAGIT COUNTY, WASHINGTON.	G TO THE PL	FORM(S).			
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DOCUMENTED ON SUBSEQUENT LOAN DISE LEGAL: LOT 21, WINDOR DRIVE, ACCORDING PG. 104, IN SKAGIT COUNTY, WASHINGTON. APN: P54897 Check only if applicable and check only one box Collateral is inheld in a	G TO THE PL	FORM(S). AT THEREOF, R	ECORDED	IN VOE. 9 O	F PLATS,
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DOCUMENTED ON SUBSEQUENT LOAN DISE LEGAL: LOT 21, WINDOR DRIVE, ACCORDING PG. 104, IN SKAGIT COUNTY, WASHINGTON. APN: P54897 Check only if applicable and check only one box: Collateral is inheld in a check only if applicable and check only one box:	G TO THE PL	FORM(S). AT THEREOF, R om 17 and (instructions) Trasmitting Utility	being administere b. Check only if a Agriculture	d by a Deceden't Persopplicable and check on all Lien Nor	F PLATS,

5. Check only if applicable and check only on	e box: Collateral isheld in a Tr	rust (see UCC1Ad, item 17 a	and Instructions) 🚊	_being administered by a Di	eceden't Personal Kepresentative
6a. Check only if applicable and check only or	ne box:			6b. Check only if applicable	e and check only whe box:
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Trasmi	tting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATE DESIGNATION (if applicable):	Lessee/Lessor	Consignee/Consignor	Seller/Buy	yer Bailee/Bailor	Licensee/License
B. OPTIONAL FILER REFERENCE DATA UPF Tracking #4266283-36959) Loar	ı #		SBA Loan #	