

**201807100007**07/10/2018 10:37 AM Pages: 1 of 1 Fees: \$99.00
Skagit County Auditor**UCC FINANCING STATEMENT**
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)	
Diana Norberg	(509) 327-9634
B. E-MAIL CONTACT AT FILER (optional)	
dianan@upfservices.com	
C. SEND ACKNOWLEDGMENT TO (Name and Address)	
Chronos Mortgage Solutions 12410 E. Mirabeau Parkway, Ste 100 Spokane Valley, WA 99216	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
ADAMS	WILLIAM	P	
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE COUNTRY
1520 Sarah St	Mount Vernon	WA	98274 USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
ADAMS	SHANNON	J	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE COUNTRY
1520 Sarah St	Mount Vernon	WA	98274 USA

3. SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one secured party name (3a or 3b)

3a. 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	CITY	STATE	POSTAL CODE COUNTRY
600 108th Ave NE Suite #1035	Bellevue	WA	98004 USA

4. COLLATERAL: This financing statement covers the following collateral:

CARRIER FURNACE & AIR CONDITIONER, ALONG WITH AFTER ACQUIRED FIXTURES PERTAINING TO ENERGY EFFICIENCY UPGRADES AT THE PROPERTY LOCATED AT: 1520 SARAH ST, MOUNT VERNON, WA 98274 AS DOCUMENTED ON SUBSEQUENT LOAN DISBURSEMENT FORM(S).

LEGAL: LOTS 21, PLAT OF BLACKBURN RIDGE, AS PER PLAT RECORDED IN VOLUME 16 OF PLATS, PAGES 2026 THROUGH 208, IN SKAGIT COUNTY, WASHINGTON.

APN: P113170

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative			
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility		6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor			
8. OPTIONAL FILER REFERENCE DATA			
Chronos Tracking #4912744-40564		Loan #	SBA Loan #

FILING OFFICE COPY -- UCC FINANCING STATEMENT (FORM UCC1) (Rev. 04/20/11)