## 201808060070

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UCC FINANCING STATEMENT	08/06/2018 10:35 A Skagit County Auditor	M Pages:	1 of 1 Fees: \$!	39.00
FOLLOW INSTRUCTIONS				
A NAME & PHONE OF CONTACT AT FILER (optional)  Jen Ely (509) 327-96	34			
B. E-MAIL CONTACT AT FILER (optional)	<del></del>			
j.ely@chronossolutions.c c. SEND ACKNOWLEDGMENT TO: (Name and Address)				
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 O	NLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact fu				
name will not fit in line 1b, leave all of item 1 blank, check here and pro	vide the Individual Debtor information in item 10	of the Financing	Statement Addendum (Form 1	JCC1Ad)
OR 15. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	1 -	NAL NAME(S)/INITIAL(S)	SUFFIX
JENSEN 1c. MAILING ADDRESS	DARREN	J	POSTAL CODE	COUNTRY
875 Bella Vista Ln	Burlington	WA	98233-	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact furname will not fit in line 2b, leave all of item 2 blank, check here and pro				
2a. ORGANIZATION'S NAME	vide the individual people information in item to		Statement Addendum (Form)	JCC (Ad)
OR				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
				USA
3. SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of ASSIGNAME  3a. ORGANIZATION'S NAME	NOR SECURED PARTY): Provide only one se	cured party name	(3a or 3b)	
Puget Sound Cooperative Credit Unio	on			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
600 108th Ave NE Suite #1035	Bellevue	WA		USA
4. COLLATERAL: This financing statement covers the following collateral:				<u></u>
BRYANT AC UNIT ALONG WITH AFTER ACQ UPGRADES AT THE PROPERTY LOCATED A				
DOCUMENTED ON SUBSEQUENT LOAN DIS		BUKLINGT	ON WA 96233 A	5
LOT 26, "PLAT OF TINAS COMA," AS PER PL NO. 200008110004, RECORDS OF SKAGIT C		T 11, 2000	, UNDER AUDITO	)R'S FILE
NO. 200000110004, RECORDS OF SKAGIT C	OUNTY, WASHINGTON.			
APN: P117061				
5. Check only if applicable and check only one box: Collateral isheld in a	Trust (see UCC1Ad, item 17 and Instructions)	being adminis	tered by a Deceden't Persona	al Representative
6a. Check only if applicable and check only one box:		T .	if applicable and check only	
Public-Finance Transaction Manufactured-Home Transaction  7. ALTERNATE DESIGNATION (if applicable): Lessage Lesson				CC Filing
7. ALTERNATE DESIGNATION (if applicable): Lessee/Lessor  8. OPTIONAL FILER REFERENCE DATA	Consignee/Consignor Seller/B	uyer   Ba	itee/Ballor   License	e/Licensor
	an#	SBA Lo	an#	