

**201809200063**09/20/2018 11:35 AM Pages: 1 of 1 Fees: \$99.00
Skagit County Auditor**UCC FINANCING STATEMENT**
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) LOAN SERVICING 360-685-4145
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) NORTH COAST CREDIT UNION 1100 DUPONT ST BELLINGHAM WA 98225

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 EATON	FIRST PERSONAL NAME CRAIG	ADDITIONAL NAME(S)/INITIAL(S) DONALD	SUFFIX
1c. MAILING ADDRESS 176939 ALLEN ROAD	CITY BOW	STATE WA	POSTAL CODE 98232	COUNTRY 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 EATON	FIRST PERSONAL NAME TARA	ADDITIONAL NAME(S)/INITIAL(S) MALAE	SUFFIX
2c. MAILING ADDRESS 17639 ALLEN ROAD	CITY BOW	STATE WA	POSTAL CODE 98232	COUNTRY USA

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

3a. ORGANIZATION'S NAME NORTH COAST CREDIT UNION				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 1100 DUPONT ST	CITY BELLINGHAM	STATE WA	POSTAL CODE 98225	COUNTRY USA

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

Roofing, appliances, kitchen cabinets and counter tops per invoice #9219 from 9 V Bar Construction LLC

(2.0000 ac) PTN NW1/4 NE1/4 NELY OF ALLEN RD AKA PTN LT 1 S/P#93-082 AF#9407110008 DAF: BAT NW COR OF SD SUB TH ELY ALG N LI 425FT TO TPOB TH S 400FT TH E PARL TO N LI 217.8FT TH N 400FT TO N LI TH WLY ALG SD N LI 217.8FT TO TPOB

PID34221/350313-1-002-0205

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. ALTERNATIVE 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:	