

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (opt onal): <b>Diana Norberg</b> (509) 327-9634	
B. E-MAIL CONTACT AT FILER (opt onal): <b>Diana.Norberg@covius.c</b>	
C. SEND ACKNOWLEDGMENT TO: (Name and Address):  <div style="border: 1px solid black; padding: 5px;"> <b>Chronos Mortgage Solutions</b>  <b>12410 E. Mirabeau Parkway, Ste 100</b>  <b>Spokane Valley, WA 99216</b> </div>	

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  
**RAMSEY**

FIRST PERSONAL NAME  
**BRIANNE**

ADDITIONAL NAME(S)/INITIAL(S) SUFFIX  
**A**

1c MAILING ADDRESS  
**17661 S Skyridge Dr**

CITY  
**Mount Vernon**

STATE POSTAL CODE COUNTRY  
**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  
**RAMSEY**

FIRST PERSONAL NAME  
**KEVIN**

ADDITIONAL NAME(S)/INITIAL(S) SUFFIX  
**T**

2c MAILING ADDRESS  
**17661 S Skyridge Dr**

CITY  
**Mount Vernon**

STATE POSTAL CODE COUNTRY  
**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  
**600 108th Ave NE Suite #1035**

CITY  
**Bellevue**

STATE POSTAL CODE COUNTRY  
**WA 98004 USA**

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

1 ANDERSEN GLASS DOOR & 2 ANDERSEN SMART SUN WINDOWS, ALONG WITH AFTER ACQUIRED FIXTURES PERTAINING TO ENERGY EFFICIENCY UPGRADES AT THE PROPERTY LOCATED AT: 17661 SOUTH SKYRIDGE DR, MOUNT VERNON, WA 98274 AS DOCUMENTED ON SUBSEQUENT LOAN DISBURSEMENT FORM(S).

LEGAL: LOT 1, SKYRIDGE DIVISION NO. V, AS PER PLAT RECORDED IN VOLUME 14 OF PLATS, PAGE 9, IN SKAGIT COUNTY, WASHINGTON.

APN: P83199

5 Check only if applicable and check only one box: Collateral is held in a Trust using UCC1Ad item 17 and instructions being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:  
Public-Finance Transaction    Manufactured-Home Transaction    A Debtor is a Transmitting Utility

6b Check only if applicable and check only one box:  
 Agricultural Lien     Non-UCC Filing

7 ALTERNATE DESIGNATION (if applicable):  
Lessee/Lessor    Consignee/Consignor    Seller/Buyer    Bailee/Bailor    Licensee/Licensor

8 OPTIONAL FILER REFERENCE DATA  
**Chronos Tracking #5986735-47161**                      Loan #                      SBA Loan #