103.50

		2/05/2019 01:38 PM Pages: 1 of 1 Fees: \$1		
		Skagit County Audit	tor, WA	
UCC FINANCING STATEMENT				
FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional)				
Diana Norberg (509) 327-9634	<b>,</b>			
B E-MAIL CONTACT AT FILER (optional)	]			
Diana.Norberg@covius.c	1			
C SEND ACKNOWLEDGMENT TO: (Name and Address)				
Chronos Mortgage Solutions	$\neg$ I			
12410 E. Mirabeau Parkway, Ste 100				
Spokane Valley, WA 99216	- 1 <b>1</b>			
		HE ABOVE SPACE IS FOR	FILING OFFICE USE OF	NLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact full na	ime; do not omit, modify, or ab	breviate any part of the Debtor's	name): if any part of the Ind:	vidual Debtor's
	the Individual Deblor informa	tion in item 10 of the Financing S	itatement Addendum (Form t	JCC1Ad
1a ORGAN ZATION'S NAME				
OR 1b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	MAI MANAF(O INSTANCE)	A==
MACH	JULIANNE	ADDITIO	NAL NAME(SelNITIALES:	SUFFIX
1c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
940 Homestead Dr	Burlington	WA	98233	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact full na	me; do not omit, modify, or ab			
	the Individual Debtor informati	tion in item 10 of the Financing S	tatement Addendum (Form L	JCC1Ad)
2a. ORGANIZATION'S NAME				
OR 25 INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S, IN TIALIS	SUFFIX
MACH	DUANE	200110	MACHAME(S)MI HACIS	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
940 Homestead Dr	Burlington	WA	98233	USA
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	SECURED PARTY): Provid	e only one secured party name	3a or 3b:	
3a ORGANIZATION'S NAME				
Puget Sound Cooperative Credit Union OR 3b INDIVIDUAL'S SURNAME				
36. 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		98004	USA
				~~
4. COLLATERAL: This financing statement covers the following collateral:			<del></del>	•
4. COLLATERAL: This financing statement covers the following collateral: 9.6KW SOLAR: 32 SILFAB PANELS & 32 ENPHA	ASE MICRO-INVE	RTERS, ALONG W	ITH AFTER ACO	UIRED

HOMESTEAD DR, BURLINGTON, WA 98233 AS DOCUMENTED ON SUBSEQUENT LOAN DISBURSEMENT

LEGAL: LOT 21, HOMESTEAD PLACE, ACCORDING TO THE PLAT THEREOF, RECORDED DECEMBER 1, 2004, UNDER AUDITOR'S FILE NO. 200505060135, IN SKAGIT COUNTY, WASHINGTON.

APN: P122265

5 Check only if applicable and check only on	e box Collateral s held in a Ti	rust (see UCC1Ad, item 17 and Instructions:	being administered by a Decede	en't Personal Representative
6a. Check onty if applicable and check only or	ne box		6b Check only if applicable and	check only one box
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Trasmitting Utility	,Agricultural Lien	Non-UCC Filing
7 ALTERNATE DESIGNATION (if applicable)	Lessee/Lessor	Consignee/Consignor Seller/I	Buyer Bailee/Bailor	Licensee/L censor
8. OPTIONAL FILER REFERENCE DATA				
Chronos Tracking #5986737-47	7162 Loai	n#	SBA Loan #	