

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294	
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
1982 33048 CSC 801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Washington (Skagit)

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 Bicknese		FIRST PERSONAL NAME Shaun	ADDITIONAL NAME(S)/INITIAL(S) A	SUFFIX
1c. MAILING ADDRESS 19405 Clarence Ln		CITY Mount Vernon	STATE WA	POSTAL CODE 98273	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 Fahoum		FIRST PERSONAL NAME Catherine	ADDITIONAL NAME(S)/INITIAL(S) P	SUFFIX
2c. MAILING ADDRESS 19405 Clarence Ln		CITY Mount Vernon	STATE WA	POSTAL CODE 98273	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 Community 1st Credit Union					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS PO Box 870		CITY DuPont	STATE WA	POSTAL CODE 98327	COUNTRY USA

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

Perfection: Purchase Money Security Interest - In Fixture. All Solar equipment including but not limited to the complete Solar system and all of its components installed at 19405 Clarence Ln Mount Vernon, WA 98273 Parcel: P17472 Alt Parcel: 33042930080000 Situs Address: 19405 Clarence Ln, Mount Vernon, WA 98273 Abbreviated Legal Description: (13.0200 Ac) The Southeast 1/4 Of The Southwest 1/4 Of Section 29, Township 33 North, Range 4 East, W.M., Except The North 250 Feet Thereof, And Except The West 792 Feet Of That Portion Of Said Southeast 1/4 Of The Southwest 1/4, Lying East Of The County Road Along The West Line Thereof And Except Those Portions Thereof Conveyed To The State Of Washington By Instruments Recorded July 27, 1956 And September 30, 1968, Under Auditors File Nos. 539335 And 718744. Together With The South 30 Feet Of The West 792 Feet Of That Portion Of The Southeast 1/4 Of The Southwest 1/4 Of Section 29, Township 33 North, Range 4 East, W.M., Lying East Of The County Road Along The West Line Thereof As Conveyed To Skagit County By Deed Recorded September 15, 1913, under Auditor's File No. 98381.

5. Check only if applicable and check only one box: Collateral is ☐ held in a Trust (see 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. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

1982 33048

**UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME

Bicknese

FIRST PERSONAL NAME

Shaun

ADDITIONAL NAME(S)/INITIAL(S)

A

SUFFIX

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10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

Fahoum-Bicknese

INDIVIDUAL'S FIRST PERSONAL NAME

Monawar

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

T

SUFFIX

10c. MAILING ADDRESS 19405 Clarence Ln

CITY

Mount Vernon

STATE

WA

POSTAL CODE

98273

COUNTRY

USA

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

15. Name and address of a RECORD OWNER of real estate described in item 16

(if Debtor does not have a record interest):

Shaun A Bicknese

Catherine P Fahoum

Monawar T Fahoum-Bicknese

19405 Clarence Ln

Mount Vernon, WA 98273

14. This FINANCING STATEMENT:

☐ covers timber to be cut☐ covers as-extracted collateral☒ is filed as a fixture filing

16. Description of real estate:

Perfection: Purchase Money Security Interest - In Fixture. All Solar equipment including but not limited to the complete Solar system and all of its components installed at 19405 Clarence Ln Mount Vernon, WA 98273 Parcel: P17472 Alt Parcel: 33042930080000 Situs Address: 19405 Clarence Ln, Mount Vernon, WA 98273 Abbreviated Legal Description: (13.0200 Ac) The Southeast 1/4 Of The Southwest 1/4 Of Section 29, Township 33 North, Range 4 East, W.M., Except The North 250 Feet Thereof, And Except The West 792 Feet Of That Portion Of Said Southeast 1/4 Of The

17. MISCELLANEOUS:

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OR 10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

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10c. MAILING ADDRESS

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STATE

POSTAL CODE

COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

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OR 11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

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11c. MAILING ADDRESS

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16. Description of real estate:

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INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

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OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

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16. Description of real estate:

Auditor's File No. 98381.

17. MISCELLANEOUS: