

**UCC FINANCING STATEMENT**

**FOLLOW INSTRUCTIONS**

A. NAME & PHONE OF CONTACT AT FILER (optional) <b>Diana Norberg</b> (509) 327-9634
B. E-MAIL CONTACT AT FILER (optional) <b>Diana.Norberg@covius.c</b>
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 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 <b>JOHNSON</b>		FIRST PERSONAL NAME <b>GRANT</b>	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS <b>1064 Alger Cain Lake Rd</b>		CITY <b>Sedro Woolley</b>	STATE <b>WA</b>	POSTAL CODE <b>98284</b>	COUNTRY <b>USA</b>

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 <b>WEST</b>		FIRST PERSONAL NAME <b>AUDREY</b>	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS <b>1064 Alger Cain Lake Rd</b>		CITY <b>Sedro Woolley</b>	STATE <b>WA</b>	POSTAL CODE <b>98284</b>	COUNTRY <b>USA</b>

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 <b>Puget Sound Cooperative Credit Union</b>					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS <b>11201 SE 8th St, Ste 208</b>		CITY <b>Bellevue</b>	STATE <b>WA</b>	POSTAL CODE <b>98004</b>	COUNTRY <b>USA</b>

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

26 ENPHASE MICRO INVERTER, 9.3KW SOLAR SYSTEM: 26 QCELL PANELS, ALONG WITH AFTER ACQUIRED FIXTURES PERTAINING TO ENERGY EFFICIENCY UPGRADES AT THE PROPERTY LOCATED AT: 1064 ALGER CAIN LAKE RD, SEDRO WOOLLEY, WA 98284 AS DOCUMENTED ON SUBSEQUENT LOAN DISBURSEMENT FORM(S).

LEGAL: LOT 1, SKAGIT COUNTY SHORT PLAT NO. 91-78, REVISED AUGUST 28, 1980, APPROVED AUGUST 28, 1980, AND RECORDED AUGUST 29, 1980, IN BOOK 4 OF SHORT PLATS, PAGE 168, UNDER SKAGIT COUNTY AUDITOR'S FILE NO. 8008290001; BEING A PORTION OF THE NORTH 1/2 OF THE NE 1/4 OF SECTION 8, T36N, R4E, OF THE WILLAMETTE MERIDIAN, IN SKAGIT COUNTY, WASHINGTON.

APN: P49135

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. ALTERNATE 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 <b>Chronos Tracking #7702166-61359</b> <b>Loan #</b> <b>SBA Loan #</b>	