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02/10/2023 08:31 AM Pages: 1 of 2 Fees: \$204.50 Skagit County Auditor, WA

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)				
2495 02775 CSC	7			
801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Washington			
	(Skagit)			
DEDTORIO MANE			OR FILING OFFICE USE	
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (us name will not fit in line 1b, leave all of item 1 blank, check here	se exact, full name; do not omit, modify, or abbreviate and provide the Individual Debtor information in item			
1a. ORGANIZATION'S NAME				
Th. INDIVIDUAL'S SURNAME Scherer	FIRST PERSONAL NAME Jacob	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
MAILING ADDRESS 713 F and S Grade Rd	Sedro Woolley	STATE WA	POSTAL CODE 98284	COUNTRY
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (us	se exact, full name; do not omit, modify, or abbreviate	any part of the Debto	I r's name); if any part of the li	l ndividual Debtor'
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 St	atement Addendum (Form U	CC1Ad)
24. ORGANIZATION S NAIVIE				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
Young	Danielle		I	
a. MAILING ADDRESS 713 F and S Grade Rd	Sedro Woolley	WA	POSTAL CODE 98284	USA
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSI	GNOR SECURED PARTY): Provide only one Secure	ed Party name (3a or 3	0)	
3a. ORGANIZATION'S NAME Verity Credit Union				
R 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
: MAILING ADDRESS 11027 Meridian Ave N	CITY	STATE WA	POSTAL CODE 98133	USA
	ISEAIIIE		100100	00/1
	Seattle Seattle			
COLLATERAL: This financing statement covers the following collaboration: Verity Credit Union is providing a collar panel installation project on their persor vill be performing the service.	teral: a closed-end personal loan to our	borrower for t		
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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 9b. INDIVIDUAL'S SURNAME Scherer FIRST PERSONAL NAME Jacob ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 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 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS COUNTRY STATE POSTAL CODE CITY ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11. 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS STATE POSTAL CODE COUNTRY CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13, 2006, Recorded September 19, 2006, Auditors File No. 200609190059, Records Of Skagit County, State of Washington. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 14. This FINANCING STATEMENT: covers timber to be cut covers as-extracted collateral 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): 17. MISCELLANEOUS: