

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
Craft3 PO Box 530233 Atlanta, GA 30353-0233

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		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Valdez		Christine	Rafaelita	
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
11220 Walker Rd		Mount Vernon	WA	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		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Batdorf		Kurt	Richard	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
11220 Walker Rd		Mount Vernon	WA	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				
Craft3				
OR				
3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
42 7th Street, Suite 100		Astoria	OR	97103
				COUNTRY
				USA

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

Septic system repair or replacement at 11220 Walker Rd, Mount Vernon, WA 98273
Abbreviated Legal Description: TRACT 2 OF SKAGIT COUNTY SHORT PLAT NUMBER 91-10 RECORDED UNDER AUDITOR'S NUMBER 9104160002 BEING A PORTION OF TRACT 4-B OF SKAGIT COUNTY SHORT PLAT NUMBER 153-79, LOCATED IN MCKENNA AND ELLIOTT'S 2ND ADDITION TO BAYVIEW, AS PER PLAT RECORDED IN VOLUME 3 OF PLATS, PAGE 19, RECORDS OF SKAGIT COUNTY, WASHINGTON.
Assessor's Parcel Number: P99853
Township-Range-Section: 35-3E-31
Full legal description on page 2.

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/Licenser

8. OPTIONAL FILER REFERENCE DATA:
SP-27109

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 <input type="checkbox"/>	
9a. ORGANIZATION'S NAME	
OR	
9b. INDIVIDUAL'S SURNAME Valdez	
FIRST PERSONAL NAME Christine	
ADDITIONAL NAME(S)/INITIAL(S) Rafaellita	SUFFIX

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					
OR					
10b. INDIVIDUAL'S SURNAME Valdez					
INDIVIDUAL'S FIRST PERSONAL NAME R					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) Christine				SUFFIX	
10c. MAILING ADDRESS 11220 Walker Rd		CITY Mount Vernon	STATE WA	POSTAL CODE 98273	COUNTRY

11. <input type="checkbox"/> ADDITIONAL SECURED PARTY'S NAME <i>or</i> <input type="checkbox"/> ASSIGNOR SECURED PARTY'S NAME: Provide only <u>one</u> 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. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	16. Description of real estate: Lot 2, Short Plat No. 91-10, approved March 4, 1991, and recorded April 16, 1991, under Auditor's File No. 9104160002; and being a portion of Tract 4B of Short Plat No. 153-79, approved January 23, 1980 and recorded January 25, 1980, in Volume 4 of Short Plat, page 25, under Auditor's File No. 8001250006; and being a portion of Tract 4, "PLAT OF BAY VIEW," McKenna and Elliott's Second Addition, as per plat recorded in Volume 3 of Plats, page 19, records of Skagit County, Washington. Situate in the County of Skagit, State of Washington. Assessor's Parcel Number: P99853.

17. MISCELLANEOUS:
Kurt R Batdorf