202408120001

08/12/2024 08:33 AM Pages: 1 of 2 Fees: \$304.50

Skagit County Auditor, WA

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS								
A. NAME & PHONE OF CONTACT AT FILER (optional)								
Elderlife Financial Lending, LLC - 888-228-4500 B. E-MAIL CONTACT AT FILER (optional)								
uccfiling@elderlifefinancial.com								
C. SEND ACKNOWLEDGMENT TO: (Name and Address)								
ELDERLIFE FINANCIAL LENDING, LLC ATTN: LEGAL DEPARTMENT	71							
100 Bluegrass Commons Blvd, Bldg. 1, Ste. 120								
HENDERSONVILLE, TN 37075								
	1							
	THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY				
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name will not fit in line 1b, leave all of item 1 blank, check here and provide the second of the name will not fit in line 1b, leave all of item 1 blank, check here and provide the name will not fit in line 1b.								
1a. ORGANIZATION'S NAME								
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX				
Lindstrom	Albert	R						
1c. MAILING ADDRESS	CITY	l l	POSTAL CODE	COUNTRY				
42026 N Shore Ln	Concrete	WA	98237	USA				
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full n								
name will not fit in line 2b, leave all of item 2 blank, check here and provide to [2a, ORGANIZATION'S NAME]	ne individual Debtor information in item 10 or t	ne Financing St	alement Addendum (Form O	CCTAG)				
24. ONGAINER HOLLO HAIRE								
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX				
Lindstrom	Helga	$ \mathbf{G} $						
2c. MAILING ADDRESS 42026 N Shore Ln	Concrete	STATE WA	98237	COUNTRY				
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECUR	RED PARTY): Provide only one Secured Party	name (3a or 3b)	1				
3a. ORGANIZATION'S NAME ELDERLIFE FINANCIAL LENDING, LLC								
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	SUFFIX					
		,						
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY				
100 BLUEGRASS COMMONS BLVD, BLDG 1, STE 120	HENDERSONVILLE	TN	37075	USA				
4. COLLATERAL: This financing statement covers the following collateral: All Fixtures appurtenant to: 42026 N Shore Lane								
ConcreteWA98237 PARCEL ID: P63260								
LEGAL DESCRIPTION:								
A PARCEL OF LAND LOCATED IN THE STATE OF WASHINGT CONCRETE, WA 98237-7709 CURRENTLY OWNED BY LINDST								
OF P63260 AND BEING THE SAME PROPERTY MORE FULLY I	DESCRIBED AS INCLUDES M/H 20	007 OAKWO	OD 27X52 ALB031639	0RAB				
TPO+612433 CAPE HORN ON THE SKAGIT SUBDIV 2 LOT 24 B 06/11/2014 AND RECORDED 06/16/2014.	LOCK H. AND DESCRIBED IN DO	CUMENT N	UMBER 6160070 DAT	ED				
Original Loan Amount: \$70,200.00								
Pursuant to the Memorandum of Agreement dated 08/08/2024,where	by Albert R Lindstrom and Helga G	Lindstrom (h	orrower(s)) promise to	nav the total				
sum due under the Promissory Note borrowers have with Elderlife F								
referenced subject property.								
		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						
	Consignee/Consignor Seller/Buyer			see/Licensor				
8. OPTIONAL FILER REFERENCE DATA:	- Selection of the sele		Licen					
	International A	Association o	of Commercial Adminis	trators (IACA)				

UCC FINANCING STATEMENT ALL FOLLOW INSTRUCTIONS	DDENDUM					
NAME OF FIRST DEBTOR: Same as line 1a or 1b on because Individual Debtor name did not fit, check here	Financing Statement; if line 1b was	left blank				
9a. ORGANIZATION'S NAME						
or 9b. individual's surname Lindstrom						
FIRST PERSONAL NAME Albert ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
R		SOFFIX	THE ABOVE	SPACE I	S FOR FILING OFFICE	USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one add do not omit, modify, or abbreviate any part of the Debtor's			1b or 2b of the F	inancing S	tatement (Form UCC1) (use	e exact, full name;
10a. ORGANIZATION'S NAME						
OR 10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
10c. MAILING ADDRESS	СІТҮ	>		STATE	POSTAL CODE	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME	or ASSIGNOR SECU	JRED PARTY'S N	IAME: Provide o	nly <u>one</u> na	me (11a or 11b)	
OR						
11b. INDIVIDUAL'S SURNAME	FIRST PER	RSONAL NAME		ADDITIO	NAL 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 REAL ESTATE RECORDS (if applicable)	□∝	NANCING STATEMEN overs timber to be cut	IT: covers as-	extracted o	collateral is filed as a	a fixture filing
15. Name and address of a RECORD OWNER of real estate d (if Debtor does not have a record interest):	42026 N Concret PARCE LEGAL A PARC OF SKA WA 982 R/LIND AND BI INCLUI	AGIT, WITH A SIT 37-7709 CURREN STROM HELGA EING THE SAME DES M/H 2007 OA ON THE SKAGIT	FUS ADDRES TLY OWNEL G HAVING A PROPERTY L KWOOD 27X SUBDIV 2 L	S OF 42 D BY LIN TAX A MORE I (52 ALB OT 24 BI	TE OF WASHINGTO 026 N SHORE LN, CO NDSTROM ALBERT SSESSOR NUMBER (FULLY DESCRIBED 0316390RAB TPO+61 LOCK H. AND DESC (2014 AND RECORDI	ONCRETE, OF P63260 AS .2433 CAPE RIBED IN
17 MISCELLANEOUS:						