

UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS



201503230054

Skagit County Auditor \$72.00
3/23/2015 Page 1 of 1 9:24AM

A. NAME & PHONE OF CONTACT AT FILER (optional) KRYSTAL DETROY 360-685-4046
B. E-MAIL CONTACT AT FILER (optional) KDETROY@NORTHCOASTCU.COM
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">NORTH COAST CREDIT UNION 1100 DUPONT STREET BELLINGHAM, WA 98225</div>

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 KNAPP	FIRST PERSONAL NAME TODD	ADDITIONAL NAME(S)/INITIAL(S) ROY	SUFFIX	
1c. MAILING ADDRESS 8369 BIRDSVIEW MEADOWS LANE	CITY CONCRETE	STATE WA	POSTAL CODE 98237	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 KNAPP	FIRST PERSONAL NAME MELINDA	ADDITIONAL NAME(S)/INITIAL(S) JEAN	SUFFIX	
2c. MAILING ADDRESS 8369 BIRDSVIEW MEADOWS LANE	CITY CONCRETE	STATE WA	POSTAL CODE 98237	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 NORTH COAST CREDIT UNION				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 1100 DUPONT STREET	CITY BELLINGHAM	STATE WA	POSTAL CODE 98225	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:
PROPERTY TAX ID: 4730-000-004-0000 P114350

LOT 4, PLAT OF BIRDSVIEW MEADOWS, ACCORDING TO THE PLAT THEREOF, RECORDED IN VOLUME 17 OF PLATS, PAGES 56 THROUGH 58, RECORDS OF SKAGIT COUNTY, WASHINGTON.

SITUATED IN SKAGIT COUNTY, WASHINGTON.

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/Licensur

8. OPTIONAL FILER REFERENCE DATA: