

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

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)	
2009 39989 CSC 801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Washington (Skagit)

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 Carter	FIRST PERSONAL NAME Robert	ADDITIONAL NAME(S)/INITIAL(S) W	SUFFIX	
1c. MAILING ADDRESS 1519 7th St		CITY Anacortes	STATE WA	POSTAL CODE 98221	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 Carter	FIRST PERSONAL NAME Sommer	ADDITIONAL NAME(S)/INITIAL(S) L	SUFFIX	
2c. MAILING ADDRESS 1519 7th St		CITY Anacortes	STATE WA	POSTAL CODE 98221	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 Community 1st Credit Union					
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS PO Box 870		CITY DuPont	STATE WA	POSTAL CODE 98327	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral: Perfection: Purchase Money Security Interest - In Fixture. All Solar equipment including but not limited to the complete Solar system and all of its components installed at 1519 7th St Anacortes, WA 98221 Parcel: P55856 Alt Parcel: 37721320100009 Situs Address: 1519 7th St, Anacortes, WA 98221 Abbreviated Legal Description: Lot 8, 9 and 10, Block 132, "MAP OF THE CITY OF ANACORTES, SKAGIT COUNTY, WASHINGTON", according to the plat thereof recorded in Volume 2 of Plats, pages 4 through 7, records of Skagit County, Washington. Map Coord: 35N-01E-13-SE

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/Licensor

8. OPTIONAL FILER REFERENCE DATA:

2009 39989

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

OR
9b. INDIVIDUAL'S SURNAME

Carter

FIRST PERSONAL NAME

Robert

ADDITIONAL NAME(S)/INITIAL(S)

W

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

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one 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. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

Robert W Carter
Sommer L Carter
1519 7th St
Anacortes, WA 98221

14. This FINANCING STATEMENT:

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

16. Description of real estate:

Perfection: Purchase Money Security Interest - In Fixture. All Solar equipment including but not limited to the complete Solar system and all of its components installed at 1519 7th St Anacortes, WA 98221 Parcel: P55856 Alt Parcel: 37721320100009 Situs Address: 1519 7th St, Anacortes, WA 98221 Abbreviated Legal Description: Lot 8, 9 and 10, Block 132, "MAP OF THE CITY OF ANACORTES, SKAGIT COUNTY, WASHINGTON", according to the plat thereof recorded in Volume 2 of Plats, pages 4 through 7, records of Skagit County, Washington. Map Coord: 35N-01E-13-SE

17. MISCELLANEOUS: