

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141	
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 59767 - Craft3	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	102432284 <b>WAWA FIXTURE</b>
File with: Skagit, WA	

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
	Mortensen	Robert	Jaie	
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
5459 Park Ridge Pl		Sedro Woolley	WA	98274
				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
	Mortensen	Suzanne		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
5459 Park Ridge Pl		Sedro Woolley	WA	98274
				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:

APN: P101721

Abbreviated Legal Description:(4.9000 AC) LOT 1, SKAGIT COUNTY SHORT PLAT NO. 93-027, APPROVED JUNE 18, 1997, AND RECORDED JUNE 25, 1997, IN VOLUME 13 OF SHORT PLATS, PAGE 15, UNDER AUDITORS FILE NO. 9706250041, RECORDS OF SKAGIT COUNTY, WASHINGTON; BEING A PORTION OF THE SOUTHEAST 1/

Septic system repair or replacement at 5459 Parkridge Pl, Sedro Woolley, WA 98274

Township-Range-Section: 36-4E-32

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/Licensor

8. OPTIONAL FILER REFERENCE DATA:

102432284 SP-28465 - DO NOT ADD



**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 Mortensen	
FIRST PERSONAL NAME Robert	
ADDITIONAL NAME(S)/INITIAL(S) Jaie	SUFFIX

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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)

14. This FINANCING STATEMENT:  
 covers timber to be cut  covers as-extracted collateral  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:  
**Parcel ID:**  
**P101721**  
  
 Lot 1, Skagit County Short Plat No. 93-027, approved June 18, 1997, and recorded June 25, 1997, in Volume 13 of Short Plats, page 15, under Auditor's File No. 9706250041, records of Skagit County, Washington; being a portion of the Southeast 1/4 of [ See Exhibit for Real Estate ]

17. MISCELLANEOUS: 102432284-WA-57 59767 - Craft3 Craft3 File with: Skagit, WA SP-28465 - DO NOT ADD



**Debtor:** Mortensen, Robert, Jaie

**Exhibit for Real Estate**

**16. Description of real estate:** Continued  
the Northeast 1/4 of Section 32, Township 36 North,  
Range 4 East, W.M. Situate in the County of Skagit,  
State of Washington.

