cy, WA	je: I OI I Auditor Tim	othy O. Todd Skamania	1
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFU	ULLY		
A. NAME PHONE OF CONTACT AT FILER [optional]			
Jan Willmering (509 B. SEND ACKNOWLEDGMENT TO: (Name and Address)	9) 327-9634		
	\neg		
UPF Services, LLC	1		
12410 E. Mirabeau Parkwa	y, Ste 100		
Spokane Valley, WA 99216	3		
	I		
		E SPACE IS FOR FILING OFFICE USE ONLY	
DEBTOR'S EXACT FULL LEGAL NAM - insert only or 1a. ORGANIZATION'S NAME	ne debtor name (1a or 1b) - do not abbreviate or combine	iames	
OR OR OR OTHER PROPERTY OF A CONTRACT NAMES	FIDST NAME	MIDDLE NAME	St
1b. INDIVIDUAL'S LAST NAME GUNDERSEN	DANIEL	MIDDLE NAME	30
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	C
221 Indian Cabin Rd 1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE	Stevenson OF ORGANIZATION 1f. JURISDICTION OF ORGANI	WA 98648 ZATION 1g. ORGANIZATIONAL ID #, if any	ı.
ORGANIZATION DEBTOR	·	4 7 P	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAM 2a. ORGANIZATION'S NAME	- insert only one debtor name (2a or 2b) - do not abbrev	ate or combine names	
	/	~ ~ ~	
2b. INDIVIDUAL'S LAST NAME Gundersen	FIRST NAME Sonda	MIDDLE NAME	SI
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	С
221 Indian Cabin Rd	Stevenson	WA 98648	
2d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR	E OF ORGANIZATION 2f. JURISDICTION OF ORGANI	ZATION 2g. ORGANIZATIONAL ID #, if any	
3. SECURED PARTY'S NAME (or NAME of TOTAL AS	SSIGNEE of ASSIGNOR S/P) - insert only one secured par	ty name (3a or 3b)	
3a. ORGANIZATION'S NAME Puget Sound Cooperative C	Credit Union		
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SU
		- 43 - 31	
3c. MAILING ADDRESS P.O. Box 97034	Bellevue	WA 98009	C
4. This FINANCING STATEMENT covers the following Mitsubishi 3-T 2-zone ductless heat enegy efficiency upgrades at the pro-	pump system & electrical, along with		g to
documented on subsequent loan dis		ta, 51040110011 4471 50040, ds	
		<i>J</i>	
Legal: Life Estate of Daniel C Gund	lersen		
APN: 03082230060100; 030822300	060106		
E ALTERNATE DEGIONATION (C			7
	ESSEE/LESSOR CONSIGNEE/CONSIGNOR BA for record) in the REAL 7.Check to REQUEST SEAR [if applicable] [ADDITIONAL FEE]		NON