04/22/2020 02:38 PM UCC Request of: eRecorded by: CSC Ingeo **UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) 1-800-858-5294 CSC B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscglobal.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1809 07961 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Washington (Skamania) 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 Selch Dawn 1c. MAILING ADDRESS 621 Metzger Rd POSTAL CODE COUNTRY CITY STATE Carson WA 98610 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 ADDITIONAL NAME(S)/INITIAL(S) 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME SUFFIX 2c. MAILING ADDRESS POSTAL CODE COUNTRY STATE 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 1st Security Bank of Washington 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. MAILING ADDRESS P. O. Box 97000 POSTAL CODE COUNTRY Lynnwood WA 98046 USA 4. COLLATERAL: This financing statement covers the following collateral: Bath APN: 03082041040300 Lot 3 Squires Sp Bk 3/Pg 361 .09 Co Rd R/W Removed. Skamania County, Washington.

Skamania County, WA

Total: \$104.50 Pgs=2

2020-000921

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:	6b. Check only if applicable and check only one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: :5151635470 SELCH	1900.0706

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 id not fit, check here 9a. ORGANIZATION'S NAME OR 9b. INDIVIDUAL'S SURNAME Selch FIRST PERSONAL NAME Dawn ADDITIONAL NAME(SYNTITAL(S) 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) (used on or only incomply and enter the mailing address in line 10c OR 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(SYNTITAL(S) 10c. MAILING ADDRESS CITY STATE POSTAL CODE 11a. ORGANIZATION'S NAME PRST PERSONAL NAME ADDITIONAL SAME POWER ONLY SURNAME INDIVIDUAL'S SURNAME FIRST PERSONAL NAME INDIVIDUAL'S SURNAME FIRST PERSONAL NAME: Provide only one name (1 fact 11b) 11a. ORGANIZATION'S NAME ADDITIONAL SAME POSTAL CODE 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYNTITAL(S) 11c. MAILING ADDRESS CITY STATE POSTAL CODE 12. ADDITIONAL SPACE FOR ITEM (Collateral):	
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12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	
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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 v is filed as a second covers.	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:	nature ming
17. MISCELLANEOUS:	