

Skamania County, WA
 Total: \$203.50 Pgs=1
 UCC
 Request of:
 eRecorded by: CSC Ingeo

2022-000985
 05/11/2022 08:03 AM

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)

2317 98714
 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 Lux	FIRST PERSONAL NAME Tanner	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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1c. MAILING ADDRESS 61 Pearl Ln

CITY Carson	STATE WA	POSTAL CODE 98610	COUNTRY USA
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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
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2c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
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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 Verity Credit Union

OR

3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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3c. MAILING ADDRESS 11027 Meridian Ave N

CITY Seattle	STATE WA	POSTAL CODE 98133	COUNTRY USA
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4. COLLATERAL: This financing statement covers the following collateral:
 Description: Verity Credit Union is providing a closed-end personal loan to our borrower for the purpose of financing their solar panel installation project on their personal residence, description provided below. A licensed and insured contractor will be performing the service.

Parcel Number: 03082130010600

Abbreviated Legal Description: Lot 2 Beard Sp Bk 3/Pg 191 (Replat-Lot 3 Lanningham Sp Bk 1/Pg 74)

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/Licenser

8. OPTIONAL FILER REFERENCE DATA:

2317 98714