		Skamania Coun Total: \$204.50 UCC Request of: eRecorded by:	Pgs=2	07/25/2022	001502 08:05 AM	
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS		circulated by:	ooo mga	•		
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)						
2363 74771 CSC 801 Adlai Stevenson Drive						
	Washington (Skamania)	TUE	1		~	
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full	name; do not omit, modify, or a	bbreviate any part of	the Debtor		dividual Debtor's	
name will not fit in line 1b, leave all of item 1 blank, check here and provide 1a. ORGANIZATION'S NAME	the Individual Debtor informatio	n in item 10 of the Fi	nancing Sta	tement Addendum (Form U	CC1Ad)	
OR 1b. INDIVIDUAL'S SURNAME	TEIDOT DEDOONAL NAME	\sim	ADDITIO	MANE (C)/INITIAL (C)	OUEEIV	
Talbott	FIRST PERSONAL NAME Rory	- 4	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 4302 Cook Underwood Rd	city Bingen		STATE WA	POSTAL CODE 98605	COUNTRY	
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide	name; do not omit, modify, or a					
2a. ORGANIZATION'S NAME	and marriage poster miletings	The Roll To St allo 1	nanonig ou	Normality (Corn) C		
OR 2b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX	
Talbott	Jennifer		ADDITIO	VAL NAME(G)/MITTAL(G)	SOFFIX	
2c. MAILING ADDRESS 4302 Cook Underwood Rd	оту Bingen	-	STATE	98605	COUNTRY	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURITY BANK OF Washington State of Assignor Security Bank of Washington B	URED PARTY): Provide only on	e Secured Party nam	ne (3a or 3b			
OR 25 INDIVIDUAL IS SUBMANTS	"	~ ~				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	7 7	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS P. O. Box 97000	CITY Lynnwood	J	STATE	POSTAL CODE 98046	COUNTRY	
4. COLLATERAL: This financing statement covers the following collateral: Roof	1					
APN: 03091130220100						
LOT 1 OF THE FLOYD HUTCHENS SHORT PLAT, RECORDS OF SKAMANIA COUNTY, WASHINGTO		OK "3" OF SI	HORT I	PLATS, PAGE 21	0,	
RECORDS OF SKAWANIA COUNTY, WASHINGTO						
		, 🗀				
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		1 _				
Public-I Illance Transaction Manufactureu-Home Transaction	A Debtor is a Transmittii	ng Utility	Agricult	ural Lien Non-UCC	Filing	

2363 74771

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS				
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Stateme	ent; if line 1b was left blank			
because Individual Debtor name did not fit, check here				
SE. OKONNIZATIONO NAIVIE				
			4	
9b. INDIVIDUAL'S SURNAME			7	
Talbott				
FIRST PERSONAL NAME			- 7	
Rory			~ ~	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	* (A 7	
40 DEDTODIO MANE			IS FOR FILING OFFIC	
 DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor nar do not omit, modify, or abbreviate any part of the Debtor's name) and enter to 		ne 1b or 2b of the Financing	Statement (Form UCC1) (use exact, full name
10a. ORGANIZATION'S NAME				
	//			
OR 10b. INDIVIDUAL'S SURNAME	- 47 - 1	4.5		
	- (4)			
INDIVIDUAL'S FIRST PERSONAL NAME	2 P P P			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			- 4	SUFFIX
- I	<u> </u>	r		
10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
		4		
	GNOR SECURED PARTY'S	NAME: Provide only one	name (11a or 11b)	
11a. ORGANIZATION'S NAME				
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDIT	ONAL NAME(S)/INITIAL(S	SUFFIX
				, I
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
		7 1		
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):			'	'
		_/ 7		
	l I			
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in	the 14. This FINANCING STATEM	FNT [.]		
REAL ESTATE RECORDS (if applicable)	covers timber to be cu		collateral is filed a	as a fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate:			
(if Debtor does not have a record interest):	APN: 03091130220			
	LOT 1 OF THE FLO			
	IN BOOK "3" OF SH			RDS OF
	SKAMANIA COUN	I I, WASHING IO	IN.	
17. MISCELLANEOUS:				
Fixture Filing				