		Total: \$2 UCC Request	a County, WA 03.50 Pgs=1 of: ed by: CSC Ingeo		- <b>001999</b> 22 07:53 AM
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) 877-505-5400					
B. E-MAIL CONTACT AT FILER (optional) recordings@gorequire.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			- 4		
Require Real Estate Solutions, LLC 5029 Corporate Woods Drive, Suite 22					
Virginia Beach, VA 23462	.5		-		
		THE ABOVE	SPACE IS FOR FILIN	G OFFICE USE OF	NLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact full na name will not fit in line 1b, leave all of item 1 blank, check here and provide the ODCANIZATIONIS NAME.					
1a. ORGANIZATION'S NAME			1 -		
1b. INDIVIDUAL'S SURNAME Calhoun	FIRST PERSONAL NAME Geoffrey		ADDITIONAL NA	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
1c. MAILING ADDRESS 281 Circle Drive	CITY UNDERWOOD			POSTAL CODE 98651	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact full na					
name will not fit in line 2b, leave all of item 2 blank, check here and provide 2a. ORGANIZATION'S NAME	the Individual Debtor in	formation in item 10 o	of the Financing Statemen	t Addendum (Form U	UC1Ad)
OR CLAND WITH A COURT AND TO					T
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL I	IAME	ADDITIONAL NA	ME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE F	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of ASSIGNOR  [3a. ORGANIZATION'S NAME]	SECURED PARTY):	Provide only one sec	ured party name (3a or 3b	)	
Puget Sound Cooperative Credit Union			<b>\</b> J	-	
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL I	IAME	ADDITIONAL NA	ME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY		STATE POSTA		COUNTRY
11201 SE 8th Street, Suite 208	BELLEVUE		WA 9800	4-6420	USA
COLLATERAL: This financing statement covers the following collateral:	10				
Fixtures and energy equipment, including but not	limited to al	laccessories	narinharal an	d associated	equinment
and after acquired equipment, installed at 281 C				a associated	equipment
Lot 9 of the SOOTER TRACTS, according to the rec County Skamania, State of Washington.	orded Plat ther	eof, recorded	d in Book 'A' of	plats, page	138, in the
Tax ID: 03102214090300					
	ust (see UCC1Ad, item 1	7 and Instructions)	being administered by		•
6a. Check only if applicable and check only one box:  Public-Finance Transaction  Manufactured-Home Transaction	A Debtor is a Tra	smitting Utility	6b. Check only if applic	_	one box: CC Filing
7. ALTERNATE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Bu			e/Licensor
8. OPTIONAL FILER REFERENCE DATA Calhoun456.					