

Washington State Department of Licensing
Uniform Commercial Code
Debtor Information Search Report

TARA DAWN KIRSCHENMANN
TARA DAWN KIRSCHENMANN
BURBANK CA USA 91505

FILED
worldreviewgroup.com
12 / 30 / 2017, 1500 hrs.

Search number: 2017-351-7755-9S
Name as provided:
Individual Name: Kirschenmann, Tara (Debtor)
Name searched:
Individual Name: KIRSCHENMANNTARA
Lien type searched: All
Lien status searched: All
Search limited by: File Numbers Searched: 2017-311-5014-3
Search logic used: Standard
Report: 12/17/2017 7:00:09 PM
Through date: 12/14/201
Copies: All

Certification:

The filing office certifies that the attached list (and copies, if any) is a true and exact representation of all financing statements and non-UCC liens for the name searched, as filed with the Department of Licensing, Uniform Commercial Code Program, as of the through date shown above. But a limited search may not reveal all records of the name searched and the searcher bears the risk of relying on such a search.



Pat Kohler
Pat Kohler, Director, Department of Licensing

1 of 1

Initial Financing Statement File Number: 2017-311-5014-3

Date and time filed: 11/7/2017 7:45:00 PM

Lapse date: NONE

- (D) Kirschenmann, Tara,
4210 West Sarah Street #41
Burbank, CA 91505 USA
- (D) TARA DAWN KIRSCHENMANN
C/O FRESNO & R STREETS
FRESNO, CA 93721 USA
- (S) Kirschenmann, Tara-Dawn:,
c/o 4210 West Sarah St.#41 Non Domestic
Burbank, CA [91505] USA

History:

Type of Record	Date & Time Filed	File#	#PGS
Initial	11/7/2017 7:45:00 PM	2017-311-5014-3	1
Amendment (Change debtor)	11/29/2017 5:09:00 PM	2017-333-0163-5	1

Current Name

TARA DAWN KIRSCHENMANN

Debtor

TARA DAWN KIRSCHENMANN
4210 West Sarah Street 41, Burbank CA 91505 USA

Authorizing Party

Kirschenmann,Tara- Dawn;

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Tara Kirschenmann [REDACTED]

B. E-MAIL CONTACT AT FILER (optional)
 [REDACTED]

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Tara Kirschenmann [REDACTED]

[REDACTED]

Burbank CA USA 91505

Date of Filing : 11/07/2017
 Time of Filing : 07:45:00 PM
 File Number : 2017-311-5014-3
 Lapse Date : NONE

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 Kirschenmann	FIRST PERSONAL NAME Tara	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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1c. MAILING ADDRESS [REDACTED]	CITY Burbank	STATE CA	POSTAL CODE 9[REDACTED]	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
TARA DAWN KIRSCHENMANN

OR

2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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2c. MAILING ADDRESS C/O FRESNO & R STREETS	CITY FRESNO	STATE CA	POSTAL CODE 93721	COUNTRY USA
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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

OR

3b. INDIVIDUAL'S SURNAME Kirschenmann	FIRST PERSONAL NAME Tara-Dawn:	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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3c. MAILING ADDRESS [REDACTED] Non Domestic	CITY Burbank	STATE CA	POSTAL CODE [91505]	COUNTRY USA
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4. COLLATERAL: This financing statement covers the following collateral:

This is Actual and Constructive Notice that all of Debtor's interest now owned or hereafter acquired is hereby accepted as collateral for securing contractual obligations in favor of the Secured Party as detailed in a true, correct, complete, notarized Security Agreement in the possession of the Secured Party.

NOTICE: In accordance with USC - Property - This is the entry of the Debtor In the Commercial Registry as a transmitting utility*, and the following property is hereby registered in the same as a public notice of a commercial transaction: BIRTH CERTIFICATE # 1[REDACTED] ; Employer Identification #

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/Licensor

8. OPTIONAL FILER REFERENCE DATA:
TARA DAWN KIRSCHENMANN

4. This FINANCING STATEMENT covers the following collateral:

██████████: UCC Contract Trust Account # 70170660000116675333-██████████; All property is Public Law 73-10, Public Law chapter 48, 48§ 112, UCC § 1-104 and California Commercial Code§ 1104. All proceeds, products accounts, fixtures and the orders therefrom are released to the Debtor to serve as collateral for the Creditor Secured Party's benefit. KIRSCHENMANN, TARA DAWN, ORGANIZATION/TRADE NAME /TRADEMARK- DEBTOR* Transmitting Utility is defined as an agent solely utilized for the purpose of transmitting commercial activity for the benefit of the Secured Party. The DEBTOR is a Legal Entity according to the Uniform Commercial Code. DEBTOR is not claiming to be a public utility.

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Tara Kirschenmann [REDACTED]

B. E-MAIL CONTACT AT FILER (optional)
 [REDACTED]

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Tara Kirschenmann [REDACTED]
TARA DAWN KIRSCHENMANN
 [REDACTED]
burbank CA USA 91505

Date of Filing : 11/29/2017
 Time of Filing : 05:09:00 PM
 File Number : 2017-333-0163-5
 Lapse Date : NONE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
2017-311-5014-3

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS
 Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:

Check one of these two boxes: Debtor or Secured Party of record

AND Check one of these three boxes to:

CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c

ADD name: Complete item 7a or 7b, and item 7c

DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME
TARA DAWN KIRSCHENMANN

OR

6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME
TARA DAWN KIRSCHENMANN

OR

7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS

[REDACTED]	CITY Burbank	STATE CA	POSTAL CODE 91505	COUNTRY USA
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8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
 If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME Kirschenmann	FIRST PERSONAL NAME Tara- Dawn;	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. OPTIONAL FILER REFERENCE DATA: