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WASH DC RECORDER OF DEEDS
IDA WILLIAMS
RECORDER OF DEEDS

Doc Type: EFINANCING

PROCESSING	\$	5.00
E-RECORD	\$	25.00
ESURCHARGE	\$	6.50

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Heather Ann Tucci-Jarraf 2535094597	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Heather Ann Tucci-Jarraf (253) 509-4597 Gig Harbor, WA 98335	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME THE UNITED STATES OF AMERICA					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS General Delivery			CITY Washington	STATE DC	POSTAL CODE NONE
1d. TAX ID #: SSN OR EIN unknown		ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION Public Trust	1f. JURISDICTION OF ORGANIZATION Public/People's	1g. ORGANIZATIONAL ID #, if any unknown <input type="checkbox"/> NONE

UNITED STATES

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME TUCCI-JARRAF		FIRST NAME HEATHER	MIDDLE NAME ANN	SUFFIX
2c. MAILING ADDRESS 3809 116th St. Ct. NW			CITY Gig Harbor	STATE WA	POSTAL CODE 98332
2d. TAX ID #: SSN OR EIN unknown		ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION natural person	2f. JURISDICTION OF ORGANIZATION Public/People's	2g. ORGANIZATIONAL ID #, if any 01012012T8A2C1-1 <input type="checkbox"/> NONE

UNITED STATES

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME THE PEOPLE OF THE UNITED STATES OF AMERICA					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS General Delivery			CITY Washington	STATE DC	POSTAL CODE NONE
					COUNTRY UNITED STATES

4. This FINANCING STATEMENT covers the following collateral:

Trustee's Bond and Oath with issue number 01012012T8A2C1-001, duly executed by Heather Ann Tucci-Jarraf on January 2, 2012, duly accepted by The One People's Public Trust 1776, with the terms and conditions as stated therein, and taken into physical custody on January 2, 2012, held by a duly bonded Trustee of The One People's Public Trust 1776; SECURED PARTY, perfected July 4, 1776, with all property and rights to property of SECURED PARTY therein, thereto, and therefrom, now duly administered by The One People's Public Trust 1776, through its duly bonded Trustee(s); NOTICE OF DULY BONDED TRUSTEE, duly served to any and all necessary parties and to always be further noticed and evidenced by a True, Accurate, and Complete digital of original Trustee's Bond and Oath duly posted via the world-wide web, at the official website of The One People's Public Trust 1776,

5. ALTERNATIVE DESIGNATION [if applicable]:		<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (if applicable) [ADDITIONAL FEE]		<input type="checkbox"/> All Debtors		<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA Bonds posted at www.peoplestrust1776.org							

RECORDER OF DEEDS

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UCC FINANCING STATEMENT ADDENDUM

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9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME THE UNITED STATES OF AMERICA		
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME				
OR	11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY
11d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any
				<input checked="" type="checkbox"/> NONE

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME				
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☐ fixture filing.

14. Description of real estate:

16. Additional collateral description:

www.peoplestrust1776.org, for all the
World to rely upon.

15. Name and address of a RECORD OWNER of above-described real estate
(if Debtor does not have a record interest):

17. Check only if applicable and check only one box.

Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate

18. Check only if applicable and check only one box.

- ☐ Debtor is a TRANSMITTING UTILITY
☐ Filed in connection with a Manufactured-Home Transaction — effective 30 years
☐ Filed in connection with a Public-Finance Transaction — effective 30 years