

2 0 0 0 0 6 1 4 0 0 1 5 Kathy Hill, Skagit County Auditor 6/14/2000 Page 1 of 1 9:16:45AM

WHEN RECORDED RETURN TO:

Skagit State Bank 301 E FAIRHAVEN AVE P O BOX 285 BURLINGTON, WA 98233

WASHINGTON U	CC-2 COUNTY AUDITO	OR FIXTURE FILING
1. Grantor(s): (last name first, and mailing address(es)) COMMUTERS TIN: 91–2011898 20257 HIGHWAY 20 BURLINGTON, WA 98233	2. Grantee(s)/Assignee/Beneficary: Skagit State Bank 301 E FAIRHAVEN AVE P O BOX 285 BURLINGTON, WA 98233	3. Assignee(s) of Secured Party(les):
THIS FIXTURE FILING SHALL COVER COLLA	TERAL THAT IS AFFIXED TO TH	E FOLLOWING DESCRIBED PROPERTY.
Reference Number:Short Legal Description:		Additional on page
		Additional on page
substitutions relating to any of the foregoin to any of the foregoing (including insura	is owned now or acquired late g; all records of any kind relati nce, general intangibles and muters, a Washington Parners	er; all accessions, additions, replacements, and ing to any of the foregoing; all proceeds relating accounts proceeds) all furniture, fixtures and ship. All of the above located on property
4 the record owner.		
This statement is signed by the Secured Party(ies)ins security interest in collateral: (Please check appropr		Complete fully if box (d) is checked: complete as applicable for (a), (b), and (c):
(a) already subject to security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or		Original recording number
(b) which is proceeds of the original collateral described above in which a security interest was perfected, or		Office where recorded
(c) as to which the recording has lapsed, or		Former name of debtor(s)
(d) acquired after a change of name, identity,	or corporate structure of the debtor(s).	
Dated June 9 Ala	_, 20 <u>00</u>	
Kenneth Crandall, General Partner and Terri TYPE NAME(S) OF DEBTOR(S) (or assignor(s))		Ite Bank (S).0F SpCured Party(IES) (or assignee(s))
	n M. Skyntsen	Elaini Hardin CC
SIGNATURE(S) OF DEBTOR(S) (or assignor(s))	SIGNATURE	(S) OF SECURED PARTY(IES) (or assignee(s))
COPY 1 - COUNTY AUDITOR	FOR	RM APPROVED FOR USE IN THE STATE OF WASHINGTON