

WHEN RECORDED RETURN TO:

Horizon Bank

PO Box 580 / 1500 Cornwall Ave.

Bellingham, WA 98227-0580



200009130058

, Skagit County Auditor

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FIRST AMERICAN TITLE CO.

WASHINGTON UCC-2 COUNTY AUDITOR FIXTURE FILING A62162E-4

1. Grantor(s): (last name first, and mailing address(es))

McPeake, David T
McPeake, Lina
546 Glenwood Inn Rd
Eastsound, WA 98245

2. Grantee(s)/Assignee/Beneficiary:

Horizon Bank
PO Box 580 / 1500 Cornwall Ave.
Bellingham, WA 98227-0580

3. Assignee(s) of Secured Party(ies):

THIS FIXTURE FILING SHALL COVER COLLATERAL THAT IS AFFIXED TO THE FOLLOWING DESCRIBED PROPERTY.

Reference Number: 0750001046

Additional on page _____

Short Legal Description: Lot 6 and 21, "Ridgewood"

Additional on page _____

Assessor's Tax Parcel ID#: 4337-000-021-0001 & 4337-000-006-0000

Legal Description: Lots 6 and 21, "Ridgewood Second Addition", according to the plat recorded in Volume 11 of plats, page 40, records of Skagit County, Washington.

THIS FIXTURE FILING COVERS THE FOLLOWING DESCRIBED PROPERTY

All Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing.

4. ☐ The debtor is the record owner.

5. This statement is signed by the Secured Party(ies) instead of the Debtor(s) to perfect a security interest in collateral: (Please check appropriate box)

(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

(b) ☐ which is proceeds of the original collateral described above in which a security interest was perfected, or

(c) ☐ as to which the recording has lapsed, or

(d) ☐ acquired after a change of name, identity, or corporate structure of the debtor(s).

6. Complete fully if box (d) is checked:

complete as applicable for (a), (b), and (c):

Original recording number _____

Office where recorded _____

Former name of debtor(s) _____

Dated _____, 20____.

David T. McPeake
Lina McPeake

TYPE NAME(S) OF DEBTOR(S) (or assignor(s))

Horizon Bank

TYPE NAME(S) OF SECURED PARTY(IES) (or assignee(s))

SIGNATURE(S) OF DEBTOR(S) (or assignor(s))

SIGNATURE(S) OF SECURED PARTY(IES) (or assignee(s))

COPY 2 - FILE COPY - DEBTOR

FORM APPROVED FOR USE IN THE STATE OF WASHINGTON