

WHEN RECORDED RETURN TO:

Skagit State Bank
301 E Fairhaven Ave, P O Box 285
Burlington, WA 98233



200108230041

, Skagit County Auditor

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WASHINGTON UCC-2 COUNTY AUDITOR FIXTURE FILING

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

NUTTER, LOUIS W. SSN: [REDACTED]
15880 MOUNTAIN VIEW RD
MOUNT VERNON, WA 98273

2. Grantee(s)/Assignee/Beneficiary:

Skagit State Bank
301 E. Fairhaven Ave
P O Box 285
Burlington, WA 98233

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

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

Reference Number:

Additional on page _____

Short Legal Description: A PTN of SW 1/4, 23-34-4 E W. N.

Additional on page _____

Assessor's Tax Parcel ID#: 340423-0-025-0000

Legal Description:

THIS FIXTURE FILING COVERS THE FOLLOWING DESCRIBED PROPERTY

1978 SAHARA 68X28 MOBILE HOME (Serial Number 813209AB) together with all equipment, including without limitation ALL DECKS, SKIRTING, AWNINGS AND BUILT-IN APPLIANCES; 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; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds).

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 8-9, 2001

LOUIS W. NUTTER

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

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

COPY 1 - COUNTY AUDITOR

Skagit State Bank

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

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

FORM APPROVED FOR USE IN THE STATE OF WASHINGTON