

AFTER RECORDING RETURN TO:
WASHINGTON FEDERAL SAVINGS
Mount Vernon Office
P.O. Box 639
Mount Vernon, WA 98273


200209190127
Skagit County Auditor
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FIXTURE FILING UCC-2

Island Title C24045

Escrow BE6567

FOR COUNTY AUDITOR INDEXING PURPOSES ONLY	
GRANTOR(S):	SIMPSON, NANCY L, TRUSTEE OF THE NANCY L SIMPSON TRUST
GRANTEE(S)	WASHINGTON FEDERAL SAVINGS DATED OCTOBER 12, 2000
ABBREVIATED LEGAL DESCRIPTION:	LOT 96, SHELTER BAY DIV. 2
ASSESSOR'S PROPERTY TAX PARCEL ACCOUNT NUMBER(S)	
	5100-002-096-0000 P84093

This FIXTURE FILING is presented pursuant to the WASHINGTON UNIFORM COMMERCIAL CODE.

1. DEBTOR(S)[or assignor(s)] (last name first, and address(es))
SIMPSON, NANCY L
THE NANCY L SIMPSON TRUST
11346 SUTTER'S MILL CIRCLE, GOLD RIVER, CA 95670
2. FOR OFFICE USE ONLY
3. NUMBER OF ADDITIONAL SHEETS ATTACHED: -0-
4. SECURED PARTY(IES)[or assignee(s)]
WASHINGTON FEDERAL SAVINGS
425 PIKE STREET
SEATTLE WASHINGTON 98101
5. ASSIGNEE(S) OF SECURED PARTY(IES)
(if applicable) (name and address(es))
6. This FIXTURE FILING covers the following types or items of property:
The goods are to become fixtures on: RESIDENCE AND FIXTURES ATTACHED THERETO AND
Legal: LOCATED ON THE FOLLOWING DESCRIBED PROPERTY:
LOT 96, REVISED MAP OF SHELTER BAY DIV.2, TRIBAL AND ALLOTTED LANDS OF SWINOMISH INDIAN RESERVATION AS RECORDED MARCH 17, 1970, IN VOLUME 43 OF OFFICIAL RECORDS, PAGES 833 THROUGH 838, RECORDS OF SKAGIT COUNTY, WASHINGTON.
SITUATED IN SKAGIT COUNTY, WASHINGTON.

This FIXTURE FILING is to be filed for record in the real estate records. If the debtor does not have an interest of record in the realty, the name of the record is _____

Products of collateral are also covered.

7.	NANCY L SIMPSON	SECURED PARTY(IES):
	TYPE NAME(S) OF DEBTOR(S)(or assignor(s))	WASHINGTON FEDERAL SAVINGS
	<i>Nancy L Simpson</i>	<i>Allen L Collins</i>
	SIGNATURE(S) OF DEBTOR(S) or assignor(s)	SIGNATURE OF SECURED PARTY(IES) or assignee(s)
	THE NANCY L SIMPSON TRUST	ALLEN L COLLINS
	TYPE NAME(S) OF DEBTORS(S) (or assignor(s))	Assistant Vice President and Manager
	<i>Nancy L Simpson, Trustee</i>	
	SIGNATURE(S) OF DEBTOR(S) or assignor(s)	
	NANCY L SIMPSON, TRUSTEE OF THE	
	NANCY L SIMPSON TRUST	

8. TERMINATION STATEMENT The SECURED PARTY(IES) certifies that the SECURED PARTY(IES) no longer claims a security interest under the FIXTURE FILING bearing the recording number shown above.

NAME _____ DATE _____

Return to: County Auditor of County where original filing/recording was made.

SIGNATURE _____