

WHEN RECORDED RETURN TO:

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



200309100148

Skagit County Auditor

9/10/2003 Page 1 of 1 10:32AM

### WASHINGTON UCC-2 COUNTY AUDITOR FIXTURE FILING

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

JENSEN, RAY A SSN: [REDACTED]  
11223A JENSEN LANE  
BURLINGTON, WA 98233

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: 109164-P

Additional on page \_\_\_\_\_

Short Legal Description: a Ptn of W $\frac{1}{2}$  of NW $\frac{1}{4}$ , 35-35-3 EWM

Additional on page \_\_\_\_\_

Assessor's Tax Parcel ID#: P35373 & P107503

Legal Description:

THIS FIXTURE FILING COVERS THE FOLLOWING DESCRIBED PROPERTY

1970 LESMAR MOBILE HOME 20X54 S/N 10811, together with all equipment, including without limitation ALL SKIRTING, AWNINGS, DECKS 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 9-5, 2003

RAY A JENSEN

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