

WHEN RECORDED RETURN TO:

Skagit State Bank  
1620 Continental Place, P O Box 1040  
Mount Vernon, WA 98274



200405180067

Skagit County Auditor

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WASHINGTON UCC-2 COUNTY AUDITOR FIXTURE FILING

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

TURNER, MARGARET C SSN:

12938 HONEY LN  
MOUNT VERNON, WA 98273

2. Grantee(s)/Assignee/Beneficiary:

Skagit State Bank  
1620 Continental Place  
P. O. Box 1040  
Mount Vernon, WA 98274

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

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

Reference Number: P102068

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

Short Legal Description: M/H only 91 Dartmouth 56x28 S/N 111854

Little Mtn MHP Sp 70

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

Assessor's Tax Parcel ID#: 340428-2-004-0070

Legal Description: 2610 E. Section St. Sp 70, Mount Vernon-Manufactured Home Only 1991 Dartmouth 56X28 Serial Number 111854 TPO #057094 Little Mountain Mobile Home Park Space Number 70 City of Mount Vernon, County of Skagit, State of Washington.

THIS FIXTURE FILING COVERS THE FOLLOWING DESCRIBED PROPERTY

ONE (1) 1991 DARTMOUTH MH 56X28 (Serial Number 111854) together with all equipment, including without limitation all tools, equipment, accessories, awnings, skirtings, 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 May 14, 20 04

Margaret C. Turner

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

Margaret C. Turner  
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))

Chris J. Sato  
SIGNATURE(S) OF SECURED PARTY(IES) (or assignee(s))

FORM APPROVED FOR USE IN THE STATE OF WASHINGTON