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



LAND TITLE OF SKAGIT COUNTY

121749-Se

## FIXTURE FILING UCC-2

FOR COUNTY AUDIT GRANTOR(S): SANDERS, STEVEN R &	OR INDEXING PURPOSES ONLY JOYCE M
GRANTEE(S) WASHINGTON FEDERAL	SAVINGS
ABBREVIATED LEGAL DESCRIPTION:_ LOT 506, SHELTER BAY DIV. 3	
ASSESSOR'S PROPERTY TAX PARCEL ACCOUNT NUMBER(S)	
5100-003-506-0000 L106135	
m : Truming Bu INC is asserted formant	the WASHINGTON UNIFORM COMMERCIAL CODE.
1. DEBTOR(S)[or assignor(s)]	2. FOR OFFICE USE ONLY
(last name first, and address[es]) SANDERS, STEVEN R	
SANDERS, JOYCE M 506 Colville Way, LaConner, WA	98257
3. NUMBER OF ADDITIONAL SHEETS AT	
4. SECURED PARTY(IES)[or assignee(s)]	5. ASSIGNEE(S) OF SECURED PARTY(IES)
WASHINGTON FEDERAL SAVINGS 425 Pike Street	(if applicable) (name and address[es])
Seattle, WA 98101	
Loan No. 319210-1	
Legal: LOCATE	ON THE FOLLOWING DESCRIBED PROPERTY:
Swinomish Indian Reservation, Records, pages 839 to 842, in Washington.	BAY DIV. 3, Tribal and Allotted Lands of "as recorded in Volume 43 of Official inclusive, records of Skagit County,
Amendment thereto recorded in under Auditor's File No. 7537	n Volume 66 of Official Records, page 462, 731.
Situate in the County of Skag	git, State of 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 collatoral are also covered.	
7. // //	SECURED PARTY(IES):
STEVEN R SANDERS	WASHINGTON FEDERAL SAVINGS
TYPE NAMES) OF DEAFOR(S)(or assignor[s])	The state of the s
SIGNATURE(S) OF DEBTOR(S)or assignor[s]	SIGNATURE OF SECURED PARTY(IES)or assignce(s)
	provide the second of the seco
JOYCE M SANDERS  TYPE NAME(S) OP DEBTORS(S) (or assignor[s])	
1 100 1 W 1 1 1 6 1 4	
SIGNATURE(S) OF DEBTOR(S) or assignor[s])	
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	Return to: County Auditor of County where
alen larm f	original filing/recording was made.
SIGNATURE	1 0 220 1/07