



200808060029

Skagit County Auditor

8/6/2008 Page 1 of 1 10:12AM

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)
LOAN SERVICING 800-755-8015

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**FIRST MUTUAL BANK
 PO BOX 1647
 BELLEVUE, WA 98009-1647**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S LAST NAME: **PEFFERMAN** FIRST NAME: **DAVID** MIDDLE NAME: SUFFIX:

1c. MAILING ADDRESS: **523 KLOSHE WAY** CITY: **LA CONNER** STATE: **WA** POSTAL CODE: **98257** COUNTRY:

1d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

2d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME: **FIRST MUTUAL BANK**

OR

3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS: **PO BOX 1647** CITY: **BELLEVUE** STATE: **WA** POSTAL CODE: **98009-1647** COUNTRY:

4. This FINANCING STATEMENT covers the following collateral:

WINDOWS
PARCEL ID: P84520

ABBREVIATED LEGAL: LT 523, "SURVEY OF SHELTER BAY DIV. 3, TRIBAL AND ALLOTTED LANDS OF SWINOMISH INDIAN RESERVATION," V.43 P.839-842.
 LEGAL: LOT 523, "SURVEY OF SHELTER BAY DIV. 3, TRIBAL AND ALLOTTED LANDS OF SWINOMISH INDIAN RESERVATION," AS RECORDED IN VOLUME 43 OF OFFICIAL RECORDS, PAGES 839 TO 842, INCLUSIVE, RECORDS OF SKAGIT COUNTY, WASHINGTON. AMENDMENT THERETO RECORDED IN VOLUME 66 OF OFFICIAL RECORDS, PAGE 462, UNDER AUDITOR'S FILE NO. 753731.
 SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON

FIXTURE FILING

ADDRESS: 523 KLOSHE WAY, LA CONNER, WA 98257

5. ALTERNATIVE DESIGNATION (if applicable) LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) (ADDITIONAL FEE) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA

PEFFERMAN, D 51-123995-01

\$42 Skagit, WA