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11/23/2020 08:31 AM Pages: 1 of 3 Fees: \$105.50

Skagit County Auditor, WA

NAME & PHONE OF CONTACT AT FILER (options me: Wolters Kluwer Lien Solutions Phone: 8				
E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com				
SEND ACKNOWLEDGMENT TO: (Name and Add	ress) 47104 - Customers Bank			
Lien Solutions	77794549			
P.O. Box 29071	•			
Glendale, CA 91209-9071	WAWA			
	FIXTURE			
File with: Skagit, WA	<u> </u>	E ABOVE SPACE IS F	OR FILING OFFICE U	SE ONLY
	a or 1b) (use exact, full name; do not omit, modify, or abbr			
ne will not it in line 15, leave all of item 1 blank, check i 1a. ORGANIZATION'S NAME	here and provide the Individual Debtor information in	item 10 of the Financing St	atement Addendum (Form	UCC1Aa)
14. 51.5.11.5.11.5.11				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
BRAY	CARLA			
AILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
18 BROADVIEW DRIVE EBTOR'S NAME: Provide only <u>one</u> Debtor name (2 me will not fit in line 2b, leave all of item 2 blank, check l	ANACORTES a or 2b) (use exact, full name; do not omit, modify, or abbrhere and provide the Individual Debtor information in	WA eviate any part of the Debto	98221 r's name); if any part of the	USA Individual Debt
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i. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a De	cedent's Personal Representative
ia. Check <u>only</u> if applicable and check <u>only</u> one box:	6b. Check <u>only</u> if applicable	e and check <u>only</u> one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien	Non-UCC Filing
ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy	er Bailee/Bailor	Licensee/Licensor
3. OPTIONAL FILER REFERENCE DATA:		
77794549 2297357		



9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Finan	sing Statement; if line 1b was left blank			
because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME				
R CO. INDIVIDUALIS SUPPLIANTS				
96. INDIVIDUAL'S SURNAME BRAY				
FIRST PERSONAL NAME CARLA				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX			
·	тн	E ABOVE SPACE	IS FOR FILING OFF	ICE USE ONLY
0. DEBTOR'S NAME: Provide (10a or 10b) only one addition		2b of the Financing S	tatement (Form UCC1) (us	e exact, full name
do not ornit, modify, or abbreviate any part of the Debtor's nar 10a. ORGANIZATION'S NAME	ne) and enter the mailing address in line 10c			
TOB. ORGANIZATION'S NAME				
10b, INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ADDITIONAL SECURED PARTY'S NAME 01 ADDITIONAL SECURED PARTY'S NAME 01 ADDITIONAL SECURED PARTY'S NAME 01	ASSIGNOR SECURED PARTY'S NAME: P	rovide only <u>one</u> nam	e (11a or 11b)	
TIS. GROANESTIGHTO NAME				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				
3. This FINANCING STATEMENT is to be filed [for record	(or recognized) in the 14. This FINANCING STATEMENT:			
REAL ESTATE RECORDS (if applicable)	·	covers as-extracted	collateral X is filed as	a fixture filing
5. Name and address of a RECORD OWNER of real estate d	escribed in item 18 16. Description of real estate:			
(if Debtor does not have a record interest):	Parcel ID:			
	P56925			
	PARCEL # P56925			

1318 BROADVIEW DRIVE ANACORTES WA 98221 [See Exhibit for Real Estate]

File with: Skagit, WA

2297357

CUSTOMERS BANK

17. MISCELLANEOUS: 77794549-WA-57 47104 - Customers Bank

Debtor: BRAY, CARLA

Exhibit for Real Estate

16. Description of real estate: Continued

BROADVIEW ADD TO ANA. TR 14

