

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



200806090062
Skagit County Auditor

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GUARDIAN NORTHWEST TITLE CO.

64207-2

FIXTURE FILING UCC-2

FOR COUNTY AUDITOR INDEXING PURPOSES ONLY	
GRANTOR(S):	ROBERT M CONNELLY AND KATRINA M CONNELLY
GRANTEE(S)	WASHINGTON FEDERAL SAVINGS
ABBREVIATED LEGAL DESCRIPTION:	LOT 868, "SHELTER BAY DIV. 5"
ASSESSOR'S PROPERTY TAX PARCEL ACCOUNT NUMBER(S)	
	5100-005-868-0000 P84865

This FIXTURE FILING is presented pursuant to the WASHINGTON UNIFORM COMMERCIAL CODE.

1. DEBTOR(S)[or assignor(s)] 2. FOR OFFICE USE ONLY

(last name first, and address(es))
CONNELLY, ROBERT M
CONNELLY, KATRINA M
868 Kalispell Dr.
LaConner, WA 98257

3. NUMBER OF ADDITIONAL SHEETS ATTACHED: -0-

4. SECURED PARTY(IES)[or assignee(s)] 5. ASSIGNEE(S) OF SECURED PARTY(IES)

WASHINGTON FEDERAL SAVINGS
425 Pike Street
Seattle, WA 98101
Loan No. 241084-3

(if applicable) (name and address(es))

6. This FIXTURE FILING covers the following types or items of property:

The goods are to become fixtures on: RESIDENCE AND FIXTURES ATTACHED THERETO AND
Legal: LOCATED ON THE FOLLOWING DESCRIBED PROPERTY:

LOT NO. 868, "AMENDED SURVEY OF SHELTER BAY DIVISION NO. 5, TRIBAL AND ALLOTTED LANDS OF SWINOMISH INDIAN RESERVATION", AS RECORDED ON JUNE 2, 1976 IN VOLUME 1 OF SURVEYS, PAGES 184 TO 186, RECORDS OF SKAGIT COUNTY, WASHINGTON, UNDER AUDITOR'S FILE NO. 836134.

SITUATED IN SKAGIT COUNTY, 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 collateral are also covered.

7. SECURED PARTY(IES):

ROBERT M CONNELLY
TYPE NAME(S) OF DEBTOR(S) (or assignor[s])

Robert Connelly
SIGNATURE(S) OF DEBTOR(S) or assignor[s]

KATRINA M CONNELLY
TYPE NAME(S) OF DEBTORS(S) (or assignor[s])

Katrina M Connelly
SIGNATURE(S) OF DEBTOR(S) or assignor[s]

WASHINGTON FEDERAL SAVINGS

Cheryl Holmstrom
SIGNATURE OF SECURED PARTY(IES) or assignee(s)
CHERYL HOLMSTROM
Assistant Manager

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 _____

DATE _____

SIGNATURE _____

Return to: County Auditor of County where original filing/recording was made.