

UCC-2 126187
COUNTY AUDITOR
Fixture Filing

LASER PRINTED FORM BOOK 159 PAGE 426

THIS SPACE PROVIDED FOR RECORDER'S USE:

FILED FOR RECORD
SKAMANIA CO. WASH
BY SKAMANIA CO. TITLE

SEP 9 12 55 PM '96

G. Savary
AUDITOR
GARY M. OLSON

WHEN RECORDED RETURN TO:

Name FIRST INDEPENDENT BANK

Address PO Box 340

City, State, Zip Stevenson, WA 98648-0340

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

*Jessie L.
Seager*

2. Secured Party(ies) and address(es):

FIRST INDEPENDENT BANK
Stevenson Office
PO Box 340
Stevenson, WA 98648-0340

3. Assignee(s) of Secured Party(ies) and address(es):

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

Lots 22 and 23, EL DESCANSO AL RIO TRACTS, according to the recorded plats thereof, recorded in Book A of Plats, Page 90, in the County of Skamania, State of Washington.

This Financing Statement is to be recorded in the real estate records.

THIS FIXTURE FILING COVERS THE FOLLOWING DESCRIBED PROPERTY

All Fixtures; 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 (a) 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 _____, 19____.

JESSIE L. SEAGER

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

Jessie L. Seager
SIGNATURE(S) OF DEBTOR(S) (or assignor(s))

COPY 1 - COUNTY AUDITOR

USE IF APPLICABLE

FIRST INDEPENDENT BANK

TYPE NAME(S) OF SECURED PARTY(IES) (or assignee(s))

[Signature]
SIGNATURE(S) OF SECURED PARTY(IES) (or assignee(s))

Registered ☒
Indexed, Dir ☒
Indirect ☒
Filmed ☒
Mailed ☒

FORM APPROVED FOR USE IN THE STATE OF WASHINGTON