WHEN RECORDED,
RETURN TO:
Washington Federal Savings
Burlington Branch
P.O. Box 527
Burlington, WA 98233
Attn:

200003010091
Kathy Hill, Skagit County Auditor
3/1/2000 Page 1 of 2 3:26:49PM

LAND TITLE COMPANY OF SKAGIT COUNTY

Date January 13th, 2000

Loan No. 017201212264-6

NOTICE OF MODIFICATION OF DEED OF TRUST

NOTICE TO ALL PERSONS is given that **Washington Federal Savings**, as the Beneficiary/(**Grantee**) of that Deed of Trust dated September 22nd, 1998, recorded under Auditor's File No. 9809230038, in the Records of Skagit County, State of Washington has, this date, modified the terms of the Note secured by the Deed of Trust ("the Loan Contract and Security Instrument"), as approved by Walter W. Cleve and Geri A. Cleve, Husband and Wife, **Grantor** (or Successor Grantor) under the Security Instrument as follows:

Check Appropriate Box(es)	**IMPORTANT:** Any numbered paragraph, which is highlighted by the mark of an "X" in the box opposite it and whose blank lines or spaces are filled in, is part of this notice. Any other numbered paragraph not so highlighted, is not part of this notice.

[X] 1. The Maturity Date of the Loan Contract and Security Instrument has been changed from May 1st, 2029 to February 1st, 2030.

[ ] 2 The Loan Contract and Security Instrument has also been modified in a manner other than change in the Maturity Date.

The purpose of this document is to provide record notice, when required, of a modification in the terms of the loan contract and security instrument. it is not intended to nor shall it be deemed to alter in any manner the actual terms of any loan modification agreement between the grantor of the security instrument (or the successor of grantor) and WASHINGTON FEDERAL SAVINGS as beneficiary. Notice is given to all persons that, except for the terms of any loan modification agreement, the terms of the original loan contract and security instrument shall in all other respects remain in full force and effect.

Grantor(s) [or Successor Grantor(s)] of Security Instrument:

Walter W. Cleve

Geri A. Cleve

(Over for notary acknowledgments)

LO122 02/16/99

STATE OF Washington)
) ss.
COUNTY OF Skagit)

I certify that I know or have satisfactory evidence that Walter W. Cleve and Geri A. Cleve

[Name(s) of person(s)]

is/are the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: 1/13/00

Doreen K. Nystrom
(Signature)

(Seal or Stamp)

DOREEN K. NYSTROM
COMMISSION EXPIRES
NOTARY
PUBLIC
3-10-2002
STATE OF WASHINGTON

Notary Public in and for the State of Washington,
residing at Mount Vernon
My commission expires 3-10-02

STATE OF)
) ss.
COUNTY OF)

I certify that I know or have satisfactory evidence that _____

[Name(s) of person(s)]

is/are the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument, on oath stated that (he/she/they) was/were authorized to execute the instrument and acknowledged it as the _____

(Type of Authority, e.g., Officer, Trustee)

of _____

(Name of the Party on Behalf of Whom the Instrument was Executed)

to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: _____

_____
(Signature)

(Seal or Stamp)

Notary Public in and for the State of _____,
residing at _____
My commission expires _____