



200205310050
Skagit County Auditor

5/31/2002 Page 1 of 3 10:23AM

When recorded mail to:
Fidelity National
Loan Portfolio Solutions
15661 Redhill Ave. Suite 200
Tustin, CA 92780 Code: WFD

Return Address:
~~Wells Fargo Bank, N. A.~~
~~P. O. BOX 31557~~
~~BILLINGS, MT 59107~~
~~DOCUMENT MANAGEMENT~~
State of Washington

Space Above This Line For Recording Data

REFERENCE # 20021157000108 ACCOUNT #: 0654-654-2545632-1998

SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. **DATE AND PARTIES.** The date of this Short Deed of Trust ("Security Instrument") is
05/13/2002 and the parties are as follows:

TRUSTOR ("Grantor"): STEVEN L TOBIASON AND HOLLY D TOBIASON, HUSBAND AND WIFE WHO
ACQUIRED TITLE AS,
STEVEN L. TOBIASON, AN UNMARRIED MAN AND HOLLY D. OLMSTED, AN UNMARRIED
WOMAN

whose address is:

21214 ESTATE DR MOUNT VERNON, WA, 98274

TRUSTEE: **Wells Fargo Financial National Bank**
c/o Specialize Service
401 West 24th Street, National City, CA 91950

BENEFICIARY ("Lender"): **WELLS FARGO BANK, N.A.**
P. O. BOX 31557
BILLINGS, MT 59107

2. **CONVEYANCE.** For good and valuable consideration, the receipt and sufficiency of which is
acknowledged, and to secure the Secured Debt (defined below) and Grantor's performance under this Security
Instrument, Grantor irrevocably grants, conveys and sells to Trustee, in trust for the benefit of Lender, with
power of sale, all of that certain real property located in the County of SKAGIT, State
of Washington, described as follows:

THE FOLLOWING DESCRIBED REAL PROPERTY LOCATED IN THE CITY OF MOUNT
VERNON, COUNTY OF SKAGIT, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS:
LOT 29, 'PLAT OF CEDAR RIDGE ESTATES DIV. NO. 1', AS PER PLAT RECORDED IN
VOLUME 15 OF PLATS, PAGES 147 THROUGH 152, INCLUSIVE, RECORDS OF SKAGIT
COUNTY, WASHINGTON.

with the address of 21214 ESTATE DR MOUNT VERNON, WA 98274043
and parcel number of P105728 together with all rights,
easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches,

and water stock and all existing and future improvements, structures, fixtures, and replacements that may now, or at any time in the future, be part of the real estate described above.

3. **MAXIMUM OBLIGATION LIMIT AND SECURED DEBT.** The total amount which this Security Instrument will secure shall not exceed \$25,000.00 together with all interest thereby accruing, as set forth in the promissory note, revolving line of credit agreement, contract, guaranty or other evidence of debt ("Secured Debt") of even date herewith, and all amendments, extensions, modifications, renewals or other documents which are incorporated by reference into this Security Instrument, now or in the future. The maturity date of the Secured Debt is 05/13/2042.
4. **MASTER FORM DEED OF TRUST.** By the delivery and execution of this Security Instrument, Grantor Agrees that all provisions and sections of the Master Form Deed of Trust ("Master Form"), inclusive, dated **February 1, 1997** and recorded on February 6, 1997 as Auditor's File Number 9702060051 in Book 1626 at Page 0614 of the Official Records in the Office of the Auditor of SKAGIT County, State of Washington, are hereby incorporated into, and shall govern, this Security Instrument.
5. **USE OF PROPERTY.** The property subject to this Security Instrument is not used principally for agricultural or farming purposes.

SIGNATURES: By signing below, Grantor agrees to perform all covenants and duties as set forth in this Security Instrument. Grantor also acknowledges receipt of a copy of this document and a copy of the provisions contained in the previously recorded Master Form (the Deed of Trust-Bank/Customer Copy).

--- FOR CLARIFICATION PURPOSES ONLY ---

STEVEN L TOBIASON	Grantor	Date
HOLLY D TOBIASON	Grantor	Date
	Grantor	Date
	Grantor	Date
	Grantor	Date
	Grantor	Date

ACKNOWLEDGMENT:

(Individual)

STATE OF _____, COUNTY OF _____ } ss.

I hereby certify that I know or have satisfactory evidence that _____

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: _____

For clarification purposes, I declare under penalty of perjury that this is an exact copy of the original document to which it is attached.

(Signature)

(Print name and include title)

My Appointment expires: _____

(Affix Seal or Stamp)

EQ249B (3/2002)

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200205310050

Skagit County Auditor

and water stock and all existing and future improvements, structures, fixtures, and replacements that may now, or at any time in the future, be part of the real estate described above.

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<u>Steven L. Tobiason</u> STEVEN L TOBIASON	Grantor	<u>5/14/02</u> Date
<u>Holly D Tobiason</u> HOLLY D TOBIASON	Grantor	<u>5-14-02</u> Date
_____	Grantor	_____ Date
_____	Grantor	_____ Date
_____	Grantor	_____ Date
_____	Grantor	_____ Date

ACKNOWLEDGMENT:

(Individual)

STATE OF Washington, COUNTY OF Skagit } ss.
I hereby certify that I know or have satisfactory evidence that Steven L. Tobiason
and Holly D. Tobiason

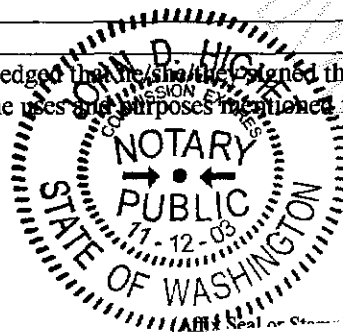
_____ is/are the
person(s) who appeared before me and said person(s) acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: 5-14-02

John D. Hight
(Signature)

John D. Hight
(Print name and include title)

My Appointment expires: 11-12-03



EQ249B (3/2002)



200205310050
Skagit County Auditor
5/31/2002 Page 3 of 3 10:23AM