

2/24/2003 Page

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211:06AM

Recording Requested by:

Wells Fargo Bank

When Recorded Return to: Fidelity National LPS

P. O. BOX 19523

Irvine, CA 92623-9523

Code: WFD

State of Washington

Space Above This Line For Recording Data\_

**REFERENCE** # 20030097000373

ACCOUNT #: 0654-654-5877938-1998

## SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Deed of Trust ("Security Instrument") is

01/21/2003

and the parties are as follows:

TRUSTOR ("Grantor"): ILIMA JEAN SHAW, A SINGLE PERSON

whose address is:

3303 W 3RD ST ANACORTES, WA,

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

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 SKAGTT . State of Washington, described as follows:

NORTHERN PACIFIC ADDITION TO ANACORTES LOTS 13 AND 14, BLOCK 706, ACCORDING TO THE PLAT RECORDED IN VOLUME 2 OF PLATS, PAGE 9, RECORDS OF SKAGIT COUNTY, WASHINGTON ABBREVIATED LEGAL NP TO ANA LOT STZE 13 & 14 BLK 706

with the address of 3303 W 3RD ST ANACORTES, WA 98221 together with all rights, easements, appurtenances, and parcel number of P58499 royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches, and water stock and all

WASHINGTON – DEED OF TRUST

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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 \$15,000.00 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 01/21/2028
- 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.

**RIDERS.** If checked, the following are applicable to this Security Instrument. The covenants and agreements of each of the riders checked below are incorporated into and supplement and amend the terms of this Security Instrument.

| N/A | Third Party Rider |
|-----|-------------------|
| N/A | Lessehold Rider   |

M/A Other

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**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).

| contained in the previously recorded Ma  | aster Form (the Deed   | of Trust-Bank                    | Customer C     | (opy).   |
|--|--|----------------------------------|----------------|--|
| Olima Gean   | Than   |                                  |                | 1-21-03  |
| TLIMA JEAN SHAW  |  | Grai                             | ntor           | Date   |
|  | <del></del>  | Gra                              | ntor           | Date   |
|  |  |                                  | ıtor           | Date   |
|  | 302240188<br>t County Auditor  | <b>II</b>                        | itor           | Date   |
| 2/24/2003 Pag  | -  | 11:06AM                          | itor           | Date   |
| ACKNOWLEDGMENT: (Individual) STATE OF  | M, COUNTY OF   | Grai<br>Slocy                    | tor (          | Date   |
| I hereby certify that I know or have satisfied the satisfied of the satisf | sfactory evidence tha  | t <u>U</u>                       | <del></del>    |  |
|  | <del>9</del>   |                                  |                | is/are the   |
| (Signatura) (Signatura) (Signatura) (Signatura)  | d said person(s) acknown and voluntary act for the said person(s) acknown and said person(s) acknown act for the said person act for the s | owledged that<br>or the uses and | he/she/they to | signed this instrument arentioned in the instrumer |
| (Print name and include title) My Appointment expires:   | 1/3,2005   | <b></b>                          | Z ABA SA       | TARKamp)   |