



200312080044
Skagit County Auditor

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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 # 20033077200709 ACCOUNT #: 0651-651-2206943-1998

SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. **DATE AND PARTIES.** The date of this Short Deed of Trust ("Security Instrument") is 11/19/2003 and the parties are as follows:

TRUSTOR ("Grantor"):
JOEL G. LUNZ, A WIDOWED MAN

whose address is: 14482 LUNZ RD ANACORTES, WA, 98221
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 COUNTY OF SKAGIT, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS THAT PORTION OF BLOCK 15 AND VACATED BLOCK 32, CITY OF FIDALGO SKAGIT COUNTY AMP TERRITORY OF

WASHINGTON, MORE COMPLETELY DESCRIBED IN EXHIBIT A

with the address of 14482 LUNZ RD ANACORTES, WA 982218482 and parcel number of 340218-0-012-0004 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.

Exhibit
(Legal Description)

Reference #: 20033077200709
Acct #: 0651-651-2206943-1998

THE FOLLOWING DESCRIBED REAL PROPERTY LOCATED IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS THAT PORTION OF BLOCK 15 AND VACATED BLOCK 32, CITY OF FIDALGO SKAGIT COUNTY amp TERRITORY OF WASHINGTON, ACCORDING TO THE PLAT RECORDED IN VOLUME 2 OF PLATS, PAGES 113 AND 114, RECORDS OF SKAGIT COUNTY, WASHINGTON, AND VACATED STREETS AND ALLEYS ADJACENT THERETO, DESCRIBED AS FOLLOWS BEGINNING AT THE SOUTHEAST CORNER OF GOVERNMENT LOT 3, SECTION 18, TOWNSHIP 34 NORTH, RANGE 2 EAST, W.M. THENCE NORTH ALONG THE EAST LINE OF SAID GOVERNMENT LOT 3, 672.5 FEET, MORE OR LESS, TO THE NORTH LINE OF LOT 7, BLOCK 15, VACATED PLAT OF CITY OF FIDALGO SKAGIT COUNTY amp TERRITORY OF WASHINGTON, EXTENDED EAST THENCE WEST ALONG SAID NORTH LINE AND ITS EXTENSION WEST 369 FEET, THENCE SOUTH PARALLEL WITH SAID EAST LINE 672.5 FEET, MORE OR LESS, TO THE SOUTH LINE OF SAID GOVERNMENT LOT 3 THENCE EAST ALONG SAID SOUTH LINE TO THE POINT OF BEGINNING EXCEPT THAT PORTION, IF ANY, LYING WITHIN EXISTING COUNTY ROADS. ALL SITUATED IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.



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3. MAXIMUM OBLIGATION LIMIT AND SECURED DEBT. The total amount which this Security Instrument will secure shall not exceed \$150,000.00 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 11/19/2043

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.

Third Party Rider

Leasehold Rider

Other _____

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 -----

JOEL G LUNZ	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: _____

(Signature) _____

(Print name and include title) _____

My Appointment expires: _____

For clarification purposes, I declare under penalty of perjury, 11/25/03, that this is an exact copy of the original document to which it is attached.

Orisha Re' Lampkin
WASHINGTON COUNTY, OREGON



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JOEL G LUNZ Joel G. Lunz Grantor 11/20/03 Date

____ Grantor _____ Date



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ACKNOWLEDGMENT:

(Individual)
 STATE OF Washington COUNTY OF Skagit } ss.
 I hereby certify that I know or have satisfactory evidence that Joel G. Lunz 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: Nov 20 2003
Myalia Ann Rowland
 (Signature)
Myalia Ann Rowland
 (Print name and include title)

My Appointment expires: July 12, 2005

