200412200061 Skagit County Auditor

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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 # 20042887000188 ACCOUNT #: 0654-654-0569863-1998

SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Deed of Trust ("Security Instrument") is 11/13/2004 and the parties are as follows:

TRUSTOR ("Grantor"):
RODNEY COOK AND DEANA COOK, HUSBAND AND WIFE

whose address is: 5188 STATE ROUTE APT 9 SEDRO WOOLLEY, WA, 98284

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:

LOT 2 OF SKAGIT COUNTY SHORT PLAT NO. 95-024, APPROVED JULY 20, 1995, AND RECORDED NOVEMBER 15, 1995, IN VOLUME 12 OF SHORT PLATS, PAGE 39, RECORDS OF SKAGIT COUNTY, WASHINGTON; BEING A PORTION OF THE NORTHEAST QUARTER OF SECTION 36, TOWNSHIP 36 NORTH, RANGE 4 EAST OF THE WILLAMETTE MERIDIAN. SITUATED IN SKAGIT COUNTY, WASHINGTON.

with the address of 5188 STATE ROUTE 9 SEDRO WOOLLEY, WA 98284
and parcel number of P112663 together with all rights,
easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches,

EQ249A (06/2002)

WASHINGTON – DEED OF TRUST

and water stock and all existing and future improvements, struct	
now, or at any time in the future, be part of the real estate described 3. MAXIMUM OBLIGATION LIMIT AND SECURED DEBT	d above. 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 cre	
evidence of debt ("Secured Debt") of even date herewith, and al	Il amendments, extensions, modifications,
renewals or other documents which are incorporated by reference	e into this Security Instrument, now or in
the future. The maturity date of the Secured Debt is 11/13/2044	d accounting of this Committy Instrument
4. MASTER FORM DEED OF TRUST. By the delivery and 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,	
9702060051 in Book 1626 at Page 0	,
in the Office of the Auditor of SKAGIT	County, State of Washington, are hereby
incorporated into, and shall govern, this Security Instrument.	v t total
5. USE OF PROPERTY. The property subject to this Security agricultural or farming purposes	y Instrument is not used principally for
RIDERS. If checked, the following are applicable to this	Security Instrument. The coverants 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 Cother N/A	
SIGNATURES: By signing below, Grantor agrees to perform all Security Instrument. Grantor also acknowledges receipt of a copy of t	
contained in the previously recorded Master Form (the Deed of Trust-E	
1 William Con W	11 12 16
runa Coor	11-15-07
DEANA COOK	Grantor Date
RODNEY 200K	Grantor Date
and the second of the second o	
	Grantor Date
	Grantor Date
	<u> </u>
	Grantor Date
	Grantor Date
ACKNOWLEDGMENT:	
(Individual)	
STATE OF MCL COUNTY OF SKI	(b) T ss.
I hereby certify that I know or have satisfactory evidence that	cha ~ Kodray Cork
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	
Dated: 1.1.13.104.7	
Land Aldenly	
(Signature)	
Pamottanage	
(Print name and include title)	(Affix Seal or Stamp)
Pamottanage	(Affix Seal of Stamp) STATE OF WASHINGTON
(Print name and include title)	STATE OF WASHINGTON PAMELA G ALDRIDGE
(Print name and include title) My Appointment expires: 11/20/2005	STATE OF WASHINGTON
(Print name and include title) My Appointment expires: 1 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /	STATE OF WASHINGTON PAMELA G ALDRIDGE
(Print name and include title) My Appointment expires: 11/20/2005	STATE OF WASHINGTON PAMELA G ALDRIDGE

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