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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 # 20043437000304 ACCOUNT #: 0651-651-7520484-1998

SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Deed of Trust ("Security Instrument") is 12/14/2004 and the parties are as follows:

TRUSTOR ("Grantor"):
BRENT A. ANDERSON, A MARRIED PERSON, WHO ACQUIRED TITLE AS,
BRENT A. ANDERSON, A SINGLE PERSON

whose address is: 705 N CENTRAL PL 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. 0. 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 9, 'PLAT OF CENTRAL PLACE', AS PER PLAT RECORDED IN VOLUME 16 OF PLATS, PAGES 103 AND 104, RECORDS OF SKAGIT COUNTY, WASHINGTON TITLE TO SAID PREMISES IS VESTED IN BRENT A. ANDERSON, A SINGLE PERSON BY DEED FROM GARY D. MCCORMICK AND AINA MCCORMICK, TRUSTEES OF THE DAYSPRING FAMILY TRUST DATED 9/16/2002 RECORDED 9/16/2002 AS INSTRUMENT NO. 200209160135.

with the address of 705 N CENTRAL PL SEDRO WOOLLEY, WA 982842121
and parcel number of P108703 together with all rights, easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches,

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WASHINGTON - DEED OF TRUST

- 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 12/14/2044
- 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
 - M/A Third Party Rider

of this Security Instrument.

- N/A Leasehold Rider
- N/A Other N/A

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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).

		11/5-6
BRENT A ANDERSON	Grantor	
Bett Conden		12-15-04
PATTY ANDERSON, NON-VESTED SPOUSE	Grantor	Date
	Grantor	Date
	Grantor	Date
	Grantor	Date
ACKNOWLEDGMENT: (Individual) STATE OF COUNTY OF	Grantor	Date
STATE OF, COUNTY OF 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 it to be his/her/their free and voluntary act for Dated:		y signed this instrument and
(Signature) Parola G. Aldride Notary		
(Print name and include title) My Appointment expires: 1 20 2005	(Affix	Seal or Stamp) NOTARY PUBLIC
		TE OF WASHINGTON
		MELA G. ALDRIDGE

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