



200502250017

Skagit County Auditor

2/25/2005 Page 1 of 3 8:59AM

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 # 20043387000596

ACCOUNT #: 0650-650-6436498-0001

SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. **DATE AND PARTIES.** The date of this Short Deed of Trust ("Security Instrument") is **12/9/2004** and the parties are as follows:
TRUSTOR ("Grantor"):

RUEBEN J. BOJORQUEZ WHO ACQUIRED TITLE AS RUBEN J. BOJORQUEZ AND MARGARETA BOJORQUEZ, HUSBAND AND WIFE

whose address is: 16563 S WALL ST MOUNT VERNON, WA 98273

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, EXCEPT THE SOUTHERLY 5 FEET THEREOF, "SOUTH WALL STREET ADDITION", AS PER PLAT RECORDED IN VOLUME 7 OF PLATS, PAGE 70, RECORDS OF SKAGIT COUNTY, WASHINGTON. SITUATE IN THE CITY OF MOUNT VERNON, COUNTY OF SKAGIT, STATE OF WASHINGTON.

PRIOR RECORDED DOC. REF.: DEED: RECORDED JANUARY 31, 2002, DOC. NO. 200201310010.

ABBREVIATED LEGAL: N/A

SUBJECT TO RESTRICTIONS, RESERVATIONS, EASEMENTS, COVENANTS, OIL, GAS OR MINERAL RIGHTS OF RECORD, IF ANY.

with the address of 16563 S WALL ST MOUNT VERNON, WA 98273
and parcel number of P69695 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 \$25,300.00 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 12/25/2019
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 N/A
-



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).

<u>RUEBEN BOJORQUEZ</u>	Grantor	<u>12/9/04</u>	Date
<u>MARGARETA BOJORQUEZ</u>	Grantor	<u>12/9/04</u>	Date
_____	Grantor	_____	Date
_____	Grantor	_____	Date
_____	Grantor	_____	Date
_____	Grantor	_____	Date

ACKNOWLEDGMENT:

(Individual)
STATE OF Washington, COUNTY OF Skiagit } ss.
I hereby certify that I know or have satisfactory evidence that Ruben Bojorquez
and Margareta Bojorquez 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: Dec 9, 2004
Teresa L Dalgliesh
(Signature)
Teresa L Dalgliesh
(Print name and include title)
My Appointment expires: Feb 26, 2005

