

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 # 20050817400964 **ACCOUNT** #: 0651-651-8029776-1998

SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Deed of Trust ("Security Instrument") is 04/12/2005 and the parties are as follows:

TRUSTOR ("Grantor"): TROY S. WILLIAMS, AN UNMARRIED MAN

whose address is: 2008 M AVE 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

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 SKAG+T , State

of Washington, described as follows:
LOT 4, BLOCK 3, 'HENSLER'S SECOND ADDITION TO ANACORTES' AS PER PLAT RECORDED IN VOLUME 3 OF PLATS, PAGE 55, RECORDS OF SKAGHI COUNTY, WASHINGTON. TITLE TO SAID PREMISES IS VESTED IN TROY S. WHILLMAMS, AN UNMARRIED MAN BY DEED FROM J. GABRIEL OLMSTED AND JEANNE B. OLMSTED, HUSBAND AND WIFE DATED 5/20/2003 AND RECORDED 5/23/2003 AS TNSTRUMENT NO. 200305230187.

with the address of 2008 M AVE ANACORTES, WA and parcel number of 3795-003-004-0003 together with all rights, easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches, **WASHINGTON - DEED OF TRUST** EQ249A (12/2004)

- 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 \$64,000.00 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 04/12/2045
- 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.

M/A Third Party Rider

MA 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).

		<i>j</i> ,
Jun SWM -		4/12/05
TROY S/WILLIAMS	Grantor	Date
	Grantor	Date
ACKNOWLEDGMENT: (Individual) STATE OF	Grantor Grantor Grantor Grantor	Date
Troy S will	a m s	(Is) are the
person(s) who appeared before me and	d said person(s) acknowledged that he/she/they e and voluntary act for the uses and purposes a	
Dated: april 12,2005 (Signature)	TMERESA E. YOU STATE OF WASHIN	ING CONTRACTOR
Theresa E Young	NOTARY PUE MY COMMISSION EXPIRES	
(Print name and include title) My Appointment expires:	-07	

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